



**UTAH
EMERGENCY
DEPARTMENT
ENCOUNTER
DATABASE**

**2005
PUBLIC-USE DATA FILE**

USER MANUAL

**Version I
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UTAH DEPARTMENT OF HEALTH

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**BUREAU OF EMERGENCY MEDICAL SERVICES
288 North 1460 West
P.O. Box 142005
Salt Lake City, Utah 84114-2005
Phone: (801) 538-6287
Fax: (801) 538-6808
www.utahems.org**

**OFFICE OF HEALTH CARE STATISTICS
288 North 1460 West
P.O. Box 144004
Salt Lake City, Utah 84114-4004
Phone: (801) 538-6700
Fax: (801) 538-9916
www.health.utah.gov/hda**

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INTRODUCTION

Utah Emergency Department Encounter Database

Administrative Rule R426-1-7 (I) mandates all Utah licensed hospitals to report information on emergency department patient encounters. The rule defines the data elements which hospitals are required to submit to the Bureau of Emergency Medical Services under statute and administrative rules specifically for the purpose of constructing a statewide Emergency Department Encounter Database. The database contains the consolidated information on complete billing, medical codes, personal characteristics describing a patient, services received, and charges billed for each patient emergency department (ED) encounter. The ED Encounter Public Data Set includes the combined data on all ED outpatient visits and ED inpatient admissions. A new field Encounter Type with values of 'o' and 'i' has been added to the record layout starting in 1999. Caution should be used when comparing this data with previous years as they only included ED outpatient visits.

All forty-one eligible hospitals submitted data in every calendar quarter (3-month period) in 2005. **DRG and APR-DRG (v. 20.0) fields including patient severity subclass and risk of mortality have been added starting in 2005.**

Public-Use Data Files (PDF)

Public-Use Data Files are designed to provide general health care information to a wide spectrum of users with minimal controls. The Director of the Bureau of Emergency Medical Services or the Director of the Office of Health Care Statistics can approve a request for a PDF without further review.

Two different public data files are available for 2005 Emergency Department Encounter Data (see page 4 for data elements and file descriptions).

Data Processing and Quality

Data submission: The Office of Health Care Statistics provides data element definitions to ensure all hospitals will report similar data. The Bureau of Emergency Medical Services/Office of Health care Statistics receives quarterly Emergency Department Encounter Data from hospitals in various formats and media. The data are converted into a standardized format.

System Edits: The data are validated through a process of automated editing and report verification. Each record is subjected to a series of edits that check for accuracy, consistency, completeness, and conformity with the definitions specified in the Utah Hospital Emergency Patient Encounter Data Submittal Manual. Records failing the edit check are returned to the data supplier for correction or comment.

Hospital Reviews: Each hospital is provided with a 35-day review period to validate the compiled data against their hospital records. Any inconsistencies discovered by the hospitals are reevaluated or corrected.

Missing Values: When dealing with unknown values, it is important to distinguish between systematic omission by hospitals, i.e., reporting exemption granted for particular data elements, coding problems that deemed the entire data from the hospital as unusable; and non-systematic omission, i.e., coding problems, invalid codes, etc. While systematic omission creates potential bias, non-systematic omission is assumed to occur randomly. The user is advised to examine missing values by hospitals for each data element to be used.

Patient Confidentiality

The Committee has taken considerable efforts to ensure that no individual patient could be identified from the PDF. Patient's age and payers are grouped. The data elements for the following specific conditions are concealed by coding them at the state level: (1) Utah zip codes where there are less than 30 ED encounters per year are coded as the county abbreviation, and out-of-state zip codes where there are less than 30 ED encounters are coded as the state abbreviation, (2) age groups, sex and zip code are encrypted as 66, E, and -6666, respectively, if the patient's Major Diagnosis Code (MDC) is 25 "Human Immunodeficiency Virus Infection" or if the Diagnosis Related Group (DRG) is 433, 521-523 "Alcohol/Drug Abuse or Dependence".

Agreement to Protect Patient Confidentiality

The data collected by the Utah Department of Health may be used only for the purpose of health statistical reporting and analysis or as specified in the user's written request for the data. Any effort to determine the identity of any reported case or any attempt to link this data set with individually identifiable records is prohibited.

Uses of Emergency Department Data

The PDF includes data on charges and length of stay in hours (LOSH). Several factors affect the comparability of charge and LOSH across hospitals, such as case-mix and severity complexity, payer-mix, market areas and hospital ownership, affiliation or teaching status. Any analysis of charge or LOSH at the hospital level should consider the above factors.

Data Format

Fixed ASCII is the standard format for the public data file, on a CD-ROM. Requests for other formats, such as a SAS Dataset, will be considered.

Citation

Any statistical reporting or analysis based on the data shall cite the source as the following:

Utah Emergency Department Encounter Data (2005). Bureau of Emergency Medical Services/Office of Health Care Statistics. Utah Department of Health. Salt Lake City, Utah. 2006.

Redistribution

User shall not redistribute the Utah Emergency Department Encounter Data File in its original format. User shall not redistribute any data products derived from the file without written permission from the Bureau of Emergency Medical Services or Office of Health Care Statistics, Utah Department of Health.

FILE LAYOUT

RECORD LAYOUT OF EMERGENCY DEPARTMENT ENCOUNTER PUBLIC USE DATA FILE I (2005.1)

	DATA ELEMENT	TYPE*	WIDTH	POSITION** From To	EXAMPLE VALUES	Pg
1	Provider identifier (hospital)	Char	3	1 - 3	101, 102, ...	8
2	Patient's age (in categories)	Num	3	4 - 6	0,1,...,21	9
3	Patient's gender	Char	1	7 - 7	M,F	9
4	Source of admission					
	Non-newborns	Char	1	8 - 8	0,1,...	9
	Newborns	Char	1	9 - 9	0,1,...	10
5	Length of stay in hours	Num	8	10 - 17	0,1,...	10
6	Patient's discharge status	Char	2	18 - 19	01,02,...	10
7	Patient's postal zip code	Char	5	20 - 24	84000, AZ	11
8	Patient's residential county	Num	3	25 - 27	1,2,...	13
9	Patient cross-county migration	Char	1	28 - 28	Y,N	13
10	Patient's marital status	Char	1	29 - 29	S,M,...	13
11	Patient's race and ethnicity	Char	2	30 - 31	W,WH,...	14
12	Principal diagnosis code	Char	5	32 - 36	8180,81513	14
13	Secondary diagnosis code 1	Char	5	37 - 41	8180,81513	14
14	Secondary diagnosis code 2	Char	5	42 - 46	8180,81513	14
15	Secondary diagnosis code 3	Char	5	47 - 51	8180,81513	14
16	Secondary diagnosis code 4	Char	5	52 - 56	8180,81513	14
17	Principal procedure	Char	4	57 - 60	480,9711	14
18	Secondary procedure 1	Char	4	61 - 64	480,9711	14
19	Secondary procedure 2	Char	4	65 - 68	480,9711	14
20	External cause code (E-code)	Char	5	69 - 73	E8119	31
21	Admission hour	Num	2	74 - 75	00,01,...	31
22	Total charge	Num	10	76 - 85	498.68	28
23	Emergency Department charge	Num	10	86 - 95	498.68	29
24	Primary payer category	Char	2	96 - 97	01,02,...	29
25	Secondary payer category	Char	2	98 - 99	01,02,...	29
26	Third payer category	Char	2	100 - 101	01,02,...	29
27	Patient's relationship to insured	Num	3	102 - 104	1,2,...	29
28	Outlier, total charge	Num	3	105 - 107	0,1	30
29	Outlier, length of stay in hours	Num	3	108 - 110	0,1	30
30	Encounter quarter	Char	1	111 - 111	1,2,3,4	30
31	< blank >		8	112 - 119		
32	Secondary diagnosis code 5	Char	5	120 - 124	8180,81513	14
33	Secondary diagnosis code 6	Char	5	125 - 129	8180,81513	14
34	Secondary diagnosis code 7	Char	5	130 - 134	8180,81513	14
35	Secondary diagnosis code 8	Char	5	135 - 139	8180,81513	14
36	Secondary procedure code 3	Char	4	140 - 143	480,9711	14
37	Secondary procedure code 4	Char	4	144 - 147	480,9711	14
38	Secondary procedure code 5	Char	4	148 - 151	480,9711	14
39	Major diagnostic category (MDC)	Num	2	152 - 153	0,1,...25	28
40	Principal diagnostic category	Num	3	154 - 156	0,1,...	30
41	Encounter Type	Char	1	157 - 157	o,i	30
42	Record ID number	Num	10	158 - 167	2500216719	30
43	DRG	Num	3	168 - 170	1 - 559	15
44	Patient severity subclass value	Char	1	171 - 171	0 - 4	31
45	Patient risk of mortality value	Char	1	172 - 172	0 - 4	31
46	APR - DRG	Num	3	173 - 175	1 - 956	32

*Variable Type (if data requested is SAS Dataset): Char=Character, Num=Numeric

**Column position (if data requested is ASCII file)

RECORD LAYOUT OF EMERGENCY DEPARTMENT ENCOUNTER PUBLIC
USE DATA FILE III (2005.3)

	DATA ELEMENT	TYPE*	WIDTH	POSITION** From To	EXAMPLE VALUES	Pg
1	Provider identifier (hospital)	Char	3	1 - 3	101, 102, ...	8
2	Patient's age (in categories)	Num	3	4 - 6	0,1,...,21	9
3	Patient's gender	Char	1	7 - 7	M,F	9
4	Length of stay in hours	Num	8	8 - 15	0,1,...	10
5	Patient's discharge status	Char	2	16 - 17	0,1,...	10
6	Patient's residential county	Num	3	18 - 20	1,2,...	13
7	Principal diagnosis code	Char	5	21 - 25	8180,81513	14
8	Principal procedure	Char	4	26 - 29	480,9711	14
9	Secondary procedure 1	Char	4	30 - 33	480,9711	14
10	Secondary procedure 2	Char	4	34 - 37	480,9711	14
11	External cause code (E-code)	Char	5	38 - 42	E8119	31
12	Admission hour	Num	2	43 - 44	00,01,...	31
13	Total charge	Num	10	45 - 54	498.68	28
14	Emergency Department charge	Num	10	55 - 64	498.68	29
15	Primary payer category	Char	2	65 - 66	01,02,..	29
16	< blank >		8	67 - 74		
17	Principal diagnostic category	Num	3	75 - 77	0,1,...	30
18	Encounter Type	Char	1	78 - 78	o,i	30
19	Record ID number	Num	10	79 - 88	2500216719	30

*Variable Type (if data requested is SAS Dataset): Char=Character, Num=Numeric

**Column position (if data requested is ASCII file)

DESCRIPTION OF DATA ELEMENTS

Provider Identifier: (see Appendix A for hospital characteristics)
Hospital from which patient was released.

101 = BEAVER VALLEY HOSPITAL
102 = MILFORD VALLEY MEMORIAL HOSPITAL
103 = BRIGHAM CITY COMMUNITY HOSPITAL
104 = BEAR RIVER VALLEY HOSPITAL
105 = LOGAN REGIONAL HOSPITAL
106 = CASTLEVIEW HOSPITAL
107 = LAKEVIEW HOSPITAL
108 = DAVIS HOSPITAL & MEDICAL CENTER
109 = UINTAH BASIN MEDICAL CENTER
110 = GARFIELD MEMORIAL HOSPITAL AND CLINICS
111 = ALLEN MEMORIAL HOSPITAL
112 = VALLEY VIEW MEDICAL CENTER
113 = CENTRAL VALLEY MEDICAL CENTER
114 = KANE COUNTY HOSPITAL
115 = FILLMORE COMMUNITY MEDICAL CENTER
116 = DELTA COMMUNITY MEDICAL CENTER
117 = JORDAN VALLEY HOSPITAL
118 = ALTA VIEW HOSPITAL
119 = COTTONWOOD HOSPITAL MEDICAL CENTER
120 = SALT LAKE REGIONAL MEDICAL CENTER
121 = LDS HOSPITAL
122 = PRIMARY CHILDREN'S MEDICAL CENTER
124 = ST. MARK'S HOSPITAL
125 = UNIVERSITY OF UTAH HOSPITALS & CLINICS
126 = PIONEER VALLEY HOSPITAL
128 = SAN JUAN HOSPITAL
129 = GUNNISON VALLEY HOSPITAL
130 = SANPETE VALLEY HOSPITAL
132 = SEVIER VALLEY HOSPITAL
133 = MOUNTAIN WEST MEDICAL CENTER
134 = ASHLEY VALLEY MEDICAL CENTER
135 = OREM COMMUNITY HOSPITAL
136 = AMERICAN FORK HOSPITAL
137 = MOUNTAIN VIEW HOSPITAL
138 = UTAH VALLEY REGIONAL MEDICAL CENTER
139 = HEBER VALLEY MEDICAL CENTER
140 = DIXIE REGIONAL MEDICAL CENTER
141 = MCKAY-DEE HOSPITAL CENTER
142 = OGDEN REGIONAL MEDICAL CENTER
144 = TIMPANOGOS REGIONAL HOSPITAL
145 = CACHE VALLEY SPECIALTY HOSPITAL (ER-OUT ONLY)
307 = THE ORTHOPEDIC SPECIALTY HOSPITAL (2003 ER-INP ONLY)
310 = UNIVERSITY HUNTSMAN CANCER HOSPITAL (ER-INP ONLY)

Patient's Age (as of last birthday) at the Date of Release

- 0 = 1 - 28 days
- 1 = 29 - 365 days
- 2 = 1 - 4 years
- 3 = 5 - 9
- 4 = 10 - 14
- 5 = 15 - 17
- 6 = 18 - 19
- 7 = 20 - 24
- 8 = 25 - 29
- 9 = 30 - 34
- 10 = 35 - 39
- 11 = 40 - 44
- 12 = 45 - 49
- 13 = 50 - 54
- 14 = 55 - 59
- 15 = 60 - 64
- 16 = 65 - 69
- 17 = 70 - 74
- 18 = 75 - 79
- 19 = 80 - 84
- 20 = 85 - 89
- 21 = 90 +
- 66 = Encrypted (confidential data)
- 99 = Unknown
- Blank = Not reported

Patient's Gender

- M = Male
- F = Female
- U = Unknown
- E = Encrypted (confidential data)
- Blank = Not reported

Source of Admission for Non-Newborns

- 0 = Newborns
- 1 = Physician Referral
The patient was admitted to this facility upon the recommendation of his or her personal physician. (See code 3 if the physician has an HMO affiliation.)
- 2 = Clinic Referral
The patient was admitted to this facility upon recommendation of this facility's clinic physician.
- 3 = HMO referral
The patient was admitted to this facility upon the recommendation of a health maintenance organization (HMO) physician.
- 4 = Transfer from a hospital
The patient was admitted to this facility as a transfer from an acute care facility where he or she was an inpatient.
- 5 = Transfer from a skilled nursing facility
The patient was admitted to this facility as a transfer from a skilled nursing facility where he or she was an inpatient.
- 6 = Transfer from another health care facility
The patient was admitted to this facility as a transfer from a health care facility other than an acute care facility or skilled nursing facility.
- 7 = Emergency Department
The patient was admitted to this facility upon the recommendation of this facility's

Emergency Department physician.

8 = Court/Law enforcement

The patient was admitted to this facility upon the direction of a court of law, or upon the request of a law enforcement agency representative.

9 = Information not available

The means by which the patient was admitted to this hospital is not known.

Blank = Not reported

Source of Admission for Newborns

0 = Non newborns

1 = Normal delivery

A baby delivered without complications.

2 = Premature delivery

A baby delivered with time or weight factors qualifying it for premature status.

3 = Sick baby

A baby delivered with medical complications, other than those relating to premature status.

4 = Extramural birth

A baby born in a non-sterile environment.

9 = Information not available.

Blank = Not reported

Length of Stay in hours

Total hours stayed in hospital from the hour of admission to the hour of release.

Blank = Not reported

Patient's Discharge Status

01 = Release to home or self care, routine release

02 = Released/transferred to another short-term general hospital

03 = Released/transferred to skilled nursing facility

04 = Released/transferred to an intermediate care facility

05 = Released/transferred to another type of institution

06 = Released/transferred to home under care of organized home health service organization

07 = Left against medical advice

08 = Released/transferred to home under care of a home IV provider

20 = Expired

40 = Expired at home

41 = Expired in a medial facility; i.e. hospital, skilled nursing facility, intermediate care facility, or free standing hospice

42 = Expired - place unknown

43 = Discharged to federal facility

50 = Discharged/transferred to hospice - home

51 = Discharged/transferred to hospice - medical facility

61 = Discharged/transferred within institution to hospital based medicare swing bed

62 = Discharged/transferred to another rehab facility

including distinct part units in hospital
 63 = Discharged/transferred to a long term care hospital
 64 = Discharged/transferred to a nursing facility
 certified under medicaid but not certified under
 medicare
65 = Discharged/transferred to a psychiatric facility
 71 = Discharged/transferred/referred to another
 institution for outpatient (as per plan of care)
 72 = Discharged/transferred to this institution
 for outpatient services(as per plan of care)
 09 = Unknown
 Blank = Not reported

Patient's Residential Postal Zip Code

84000-84799 = Zip codes in Utah
 -4444 = Homeless (word homeless or homeless code of ZZZZZ given as address)
 -5555 = Unknown Utah (Unknown/invalid zip code with Utah address)
 (Note: If the city is present in the address but the zip code is not, the zip code variable is
 coded as -5555 while the county variable is coded with the actual county identifier)
 -6666 = Encrypted (confidential data)
 -8888 = Unknown (completely missing address information)
 -9999 = Outside U.S.A. (foreign address)

Helpful Hint: A quick way to identify the city associated with a
 zip code is to use the United States Postal Service website:
http://www.usps.gov/ncsc/lookups/lookup_ctystzip.html

If less than 30 encounters occurred for a Utah zip code area, this zip code was mapped into the
 county code:

Beave = Beaver
 BoxEl = Box Elder
 Cache = Cache
 Carbo = Carbon
 Dagge = Daggett
 Davis = Davis
 Duche = Duchesne
 Emery = Emery
 Garfi = Garfield
 Iron = Iron
 Milla = Millard
 Morga = Morgan
 MulCo = Multi county
 Piute = Piute
 Rich = Rich
 SaltL = Salt Lake
 SanJu = San Juan
 Sanpe = Sanpete
 Sevie = Sevier
 Summi = Summit
 Tooel = Tooele
 Uinta = Uintah
 Washi = Washington
 Wayne = Wayne
 Weber = Weber

If less than 30 encounters occurred for a non-Utah zip code area, this zip code was mapped into the state code:

AL = ALABAMA
AK = ALASKA
AZ = ARIZONA
AR = ARKANSAS
CA = CALIFORNIA
CO = COLORADO
CT = CONNECTICUT
DE = DELAWARE
DC = DISTRICT OF COLUMBIA
FL = FLORIDA
GA = GEORGIA
HI = HAWAII
ID = IDAHO
IL = ILLINOIS
IN = INDIANA
IA = IOWA
KS = KANSAS
KY = KENTUCKY
LA = LOUISIANA
ME = MAINE
MD = MARYLAND
MA = MASSACHUSETTS
MI = MICHIGAN
MN = MINNESOTA
MS = MISSISSIPPI
MO = MISSOURI
MT = MONTANA
NE = NEBRASKA
NV = NEVADA
NH = NEW HAMPSHIRE
NJ = NEW JERSEY
NM = NEW MEXICO
NY = NEW YORK
NC = NORTH CAROLINA
ND = NORTH DAKOTA
OH = OHIO
OK = OKLAHOMA
OR = OREGON
PA = PENNSYLVANIA
RI = RHODE ISLAND
SC = SOUTH CAROLINA
SD = SOUTH DAKOTA
TN = TENNESSEE
TX = TEXAS
UT = UTAH
VT = VERMONT
VA = VIRGINIA
WA = WASHINGTON
WV = WEST VIRGINIA
WI = WISCONSIN
WY = WYOMING
PR = PUERTO RICO
GU = GUAM

Patient's Residential County

1= Box Elder
2= Cache
3= Rich
4= Morgan
5= Weber
6= Davis
7= Salt Lake
8= Summit
9= Tooele
10= Utah
11= Wasatch
12= Daggett
13= Duchesne
14= Uintah
15= Juab
16= Millard
18= Sanpete
17= Piute
19= Sevier
20= Wayne
21= Carbon
22= Emery
23= Grand
24= San Juan
25= Beaver
26= Garfield
27= Iron
28= Kane
29= Washington
30= Multi-County (used in earlier versions of Dataset--the category has been eliminated)
44= Homeless (word homeless or homeless code of ZZZZZ given as address)
55= Unknown Utah (unknown city & zip but Utah in address)
77= Outside Utah (but in U.S.A.)
88= Unknown (completely missing address information)
99= Outside U.S.A. (foreign address)

Patient's Cross-County Migrant Status (hospital in different county than patient residence)

Y = Yes (includes out-of-state, foreign, out-of-county, homeless)

N = No (from same county)

U = Unknown (includes unknown and unknown but Utah residence)

Patient's Marital Status

S = Single

M = Married

X = Legally Separated

D = Divorced

W = Widowed

U = Unknown

P = Life Partner

Blank = Not reported

Patient's Race and Ethnicity

W	=	White, non-Hispanic origin
WH	=	White, Hispanic origin
NW	=	Non-white, Hispanic origin
NH	=	Non-white, non-Hispanic origin
UK	=	Unknown
Blank	=	Not reported

Principal Diagnosis Code

The first four digits of ICD-9-CM code. Refer to *International Classification of Diseases (9th Revision): Clinical Modification* for description.

There is an "implied" decimal point between the 3rd and 4th digit (decimal point is part of ICD-9-CM code but has been stripped out of data).

Blank = Not reported

ICD-9-CM E-Codes and V-Codes might also be found in this field.

The ICD-9-CM diagnosis codes, as well as the E-Codes and V-Codes can be looked up on the Internet at Yaki Technologies' Website www.eicd.com/eicdmain.htm.

Secondary Diagnosis Code 1 ... Secondary Diagnosis Code 8

Definition and category are the same as the Principal Diagnosis Code.

Principal Procedure Code

The four digits of ICD-9-CM code. Refer to *International Classification of Diseases (9th Revision): Clinical Modification* for description.

There is an "implied" decimal point between the 2nd and 3rd digit (decimal point is part of ICD-9-CM code but has been stripped out of data).

Blank = Not reported

Secondary Procedure Code 1 ... Secondary Procedure Code 5

Definition and category are the same as Principal Procedure Code

Diagnosis Related Group (DRG)

- 1* CRANIOTOMY AGE >17 EXCEPT FOR TRAUMA (prior to 10-1-02)
- 1* CRANIOTOMY AGE >17 WITH COMPLICATIONS, COMORBIDITIES (beginning 10-1-02)
- 2* CRANIOTOMY FOR TRAUMA AGE >17 (prior to 10-1-02)
- 2* CRANIOTOMY AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES (beginning 10-1-02)
- 3 CRANIOTOMY AGE 0-17
- 4* SPINAL PROCEDURES (prior to 10-1-03; no DRG 4 beginning 10-1-03 when DRGs 531-532 were added)
- 5* EXTRACRANIAL VASCULAR PROCEDURES (prior to 10-1-03; no DRG 5 beginning 10-1-03 when DRGs 533-534 were added)
- 6 CARPAL TUNNEL RELEASE
- 7 PERIPHERAL & CRANIAL NERVE & OTHER NERVE SYSTEM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
- 8 PERIPHERAL & CRANIAL NERVE & OTHER NERVE SYSTEM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
- 9 SPINAL DISORDERS & INJURIES
- 10 NERVOUS SYSTEM NEOPLASMS WITH COMPLICATIONS, COMORBIDITIES
- 11 NERVOUS SYSTEM NEOPLASMS WITHOUT COMPLICATIONS, COMORBIDITIES
- 12 DEGENERATIVE NERVOUS SYSTEM DISORDERS
- 13 MULTIPLE SCLEROSIS & CEREBELLAR ATAXIA
- 14* SPECIFIC CEREBROVASCULAR DISORDERS EXCEPT TRANSIENT ISCHEMIC ATTACK (prior to 10-1-02)
- 14* INTRA CRANIAL HEMORRHAGE AND STROKE WITH INFARCTION (beginning 10-1-02, used to 10-1-04)
- 14* INTRACRANIAL HEMORRHAGE & STROKE W/ INFARCTION (beginning 10-1-03)
- 14* INTRACRANIAL HEMORRHAGE OR CEREBRAL INFARCTION (beginning 10-1-04)
- 15* TRANSIENT ISCHEMIC ATTACK & PRECEREBRAL OCCLUSIONS (prior to 10-1-02)
- 15* NONSPECIFIC CEREBROVASCULAR AND PRECEREBRAL OCCLUSION WITHOUT INFARCTION (beginning 10-1-02)
- 16 NONSPECIFIC CEREBROVASCULAR DISORDERS WITH COMPLICATIONS, COMORBIDITIES
- 17 NONSPECIFIC CEREBROVASCULAR DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
- 18 CRANIAL & PERIPHERAL NERVE DISORDERS WITH COMPLICATIONS, COMORBIDITIES
- 19 CRANIAL & PERIPHERAL NERVE DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
- 20 NERVOUS SYSTEM INFECTION EXCEPT VIRAL MENINGITIS
- 21 VIRAL MENINGITIS
- 22 HYPERTENSIVE ENCEPHALOPATHY
- 23 NONTRAUMATIC STUPOR & COMA
- 24 SEIZURE & HEADACHE AGE >17 WITH COMPLICATIONS, COMORBIDITIES
- 25 SEIZURE & HEADACHE AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
- 26 SEIZURE & HEADACHE AGE 0-17
- 27 TRAUMATIC STUPOR & COMA, COMA >1 HR
- 28 TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 WITH COMPLICATIONS, COMORBIDITIES
- 29 TRAUMATIC STUPOR & COMA, COMA <1 HR AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
- 30 TRAUMATIC STUPOR & COMA, COMA <1 HR AGE 0-17
- 31 CONCUSSION AGE >17 WITH COMPLICATIONS, COMORBIDITIES
- 32 CONCUSSION AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
- 33 CONCUSSION AGE 0-17
- 34 OTHER DISORDERS OF NERVOUS SYSTEM WITH COMPLICATIONS, COMORBIDITIES
- 35 OTHER DISORDERS OF NERVOUS SYSTEM WITHOUT COMPLICATION, COMORBIDITIES
- 36 RETINAL PROCEDURES
- 37 ORBITAL PROCEDURES
- 38 PRIMARY IRIS PROCEDURES
- 39 LENS PROCEDURES WITH OR WITHOUT VITRECTOMY
- 40 EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE >17
- 41 EXTRAOCULAR PROCEDURES EXCEPT ORBIT AGE 0-17
- 42 INTRAOCULAR PROCEDURES EXCEPT RETINA, IRIS & LENS

Diagnosis Related Group (DRG)

43	HYPHEMA
44	ACUTE MAJOR EYE INFECTIONS
45	NEUROLOGICAL EYE DISORDERS
46	OTHER DISORDERS OF THE EYE AGE >17 WITH COMPLICATIONS, COMORBIDITIES
47	OTHER DISORDERS OF THE EYE AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
48	OTHER DISORDERS OF THE EYE AGE 0-17
49	MAJOR HEAD & NECK PROCEDURES
50	SIALOADENECTOMY
51	SALIVARY GLAND PROCEDURES EXCEPT SIALOADENECTOMY
52	CLEFT LIP & PALATE REPAIR
53	SINUS & MASTOID PROCEDURES AGE >17
54	SINUS & MASTOID PROCEDURES AGE 0-17
55	MISCELLANEOUS EAR, NOSE, MOUTH & THROAT PROCEDURES
56	RHINOPLASTY
57	TONSIL & ADENOID PROCEDURES, EXCEPT TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE >17
58	TONSIL & ADENOID PROCEDURES, EXCEPT TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE 0-17
59	TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE >17
60	TONSILLECTOMY &/OR ADENOIDECTOMY ONLY, AGE 0-17
61	MYRINGOTOMY WITH TUBE INSERTION AGE >17
62	MYRINGOTOMY WITH TUBE INSERTION AGE 0-17
63	OTHER EAR, NOSE, MOUTH & THROAT OPERATING ROOM PROCEDURES
64	EAR, NOSE, MOUTH & THROAT MALIGNANCY
65	DISEQUILIBRIUM
66	EPISTAXIS
67	EPIGLOTTITIS
68	OTITIS MEDIA & UPPER RESPIRATORY INFECTION AGE >17 WITH COMPLICATIONS, COMORBIDITIES
69	OTITIS MEDIA & UPPER RESPIRATORY INFECTION AGE > 17 WITHOUT COMPLICATIONS, COMORBIDITIES
70	OTITIS MEDIA & UPPER RESPIRATORY INFECTION AGE 0-17
71	LARYNGOTRACHEITIS
72	NASAL TRAUMA & DEFORMITY
73	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE >17
74	OTHER EAR, NOSE, MOUTH & THROAT DIAGNOSES AGE 0-17
75	MAJOR CHEST PROCEDURES
76	OTHER RESPIRATORY SYSTEM OPERATING ROOM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
77	OTHER RESPIRATORY SYSTEM OPERATING ROOM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
78	PULMONARY EMBOLISM
79	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 WITH COMPLICATIONS, COMORBIDITIES
80	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
81	RESPIRATORY INFECTIONS & INFLAMMATIONS AGE 0-17
82	RESPIRATORY NEOPLASMS
83	MAJOR CHEST TRAUMA WITH COMPLICATIONS, COMORBIDITIES
84	MAJOR CHEST TRAUMA WITHOUT COMPLICATIONS, COMORBIDITIES
85	PLEURAL EFFUSION WITH COMPLICATIONS, COMORBIDITIES
86	PLEURAL EFFUSION WITHOUT COMPLICATIONS, COMORBIDITIES
87	PULMONARY EDEMA & RESPIRATORY FAILURE
88	CHRONIC OBSTRUCTIVE PULMONARY DISEASE
89	SIMPLE PNEUMONIA & PLEURISY AGE >17 WITH COMPLICATIONS, COMORBIDITIES
90	SIMPLE PNEUMONIA & PLEURISY AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
91	SIMPLE PNEUMONIA & PLEURISY AGE 0-17
92	INTERSTITIAL LUNG DISEASE WITH COMPLICATIONS, COMORBIDITIES
93	INTERSTITIAL LUNG DISEASE WITHOUT COMPLICATIONS, COMORBIDITIES
94	PNEUMOTHORAX WITH COMPLICATIONS, COMORBIDITIES

Diagnosis Related Group (DRG)

95	PNEUMOTHORAX WITHOUT COMPLICATIONS, COMORBIDITIES
96	BRONCHITIS & ASTHMA AGE >17 WITH COMPLICATIONS, COMORBIDITIES
97	BRONCHITIS & ASTHMA AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
98	BRONCHITIS & ASTHMA AGE 0-17
99	RESPIRATORY SIGNS & SYMPTOMS WITH COMPLICATIONS, COMORBIDITIES
100	RESPIRATORY SIGNS & SYMPTOMS WITHOUT COMPLICATIONS, COMORBIDITIES
101	OTHER RESPIRATORY SYSTEM DIAGNOSES WITH COMPLICATIONS, COMORBIDITIES
102	OTHER RESPIRATORY SYSTEM DIAGNOSES WITHOUT COMPLICATIONS, COMORBIDITIES
103*	HEART TRANSPLANT (prior to 10-1-04)
103*	HEART TRANSPLANT OR IMPLANT OF HEART ASSIST SYSTEM (beginning 10-1-04)
104*	CARDIAC VALVE PROCEDURES WITH CARDIAC CATHETER (prior to 10-1-98)
104*	CARDIAC VALVE & OTHER MAJOR CARDIOTHORACIC PROCEDURES WITH CARDIAC CATHETER (beginning 10-1-98)
105*	CARDIAC VALVE PROCEDURES WITHOUT CARDIAC CATHETER (prior to 10-1-98)
105*	CARDIAC VALVE & OTHER MAJOR CARDIOTHORACIC PROC WITHOUT CARDIAC CATHETER (beginning 10-1-98)
106*	CORONARY BYPASS WITH CARDIAC CATHETER (prior to 10-1-98)
106*	CORONARY BYPASS WITH PTCA (beginning 10-1-98)
107*	CORONARY BYPASS WITHOUT CARDIAC CATHETER (prior to 10-1-98)
107*	CORONARY BYPASS WITH CARDIAC CATHETER (beginning 10-1-98; no DRG 107 beginning 10-1-05 when DRGs 547-548 were added)
108	OTHER CARDIOTHORACIC PROCEDURES
109*	CORONARY BYPASS WITHOUT CARDIAC CATHETER (beginning 10-1-98; no DRG 109 beginning 10-1-05 when DRGs 549-550 were added)
110	MAJOR CARDIOVASCULAR PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
111	MAJOR CARDIOVASCULAR PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
112*	PERCUTANEOUS CARDIOVASCULAR PROCEDURES (prior to 10-1-01; no DRG 112 beginning 10-1-01 when DRGs 516-518 were added)
113	AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS EXCEPT UPPER LIMB & TOE
114	UPPER LIMB & TOE AMPUTATION FOR CIRCULATORY SYSTEM DISORDERS
115*	PERMANENT CARDIAC PACEMAKER IMPLANT WITH ACUTE MYOCARDIAL INFARCTION, HEART FAILURE OR SHOCK (prior to 10-1-97)
115*	PERMANENT CARDIAC PACEMAKER IMPLANT WITH ACUTE MYOCARDIAL INFARCTION, HEART FAILURE OR SHOCK, OR AICD LEAD OR GENERATOR PROC (beginning 10-1-97; no DRG 115 beginning 10-1-05 when DRG 551 was added)
116*	OTHER PERMANENT CARDIAC PACEMAKER IMPLANT OR AICD LEAD OR GENERATOR PROC (prior to 10-1-97)
116*	OTHER PERMANENT CARDIAC PACEMAKER IMPLANT OR PTCA WITH CORONARY ARTERY STENT IMPLANT (between 10-1-97 and 10-1-01)
116*	OTHER CARDIAC PACEMAKER IMPLANTATION (beginning 10-1-01; no DRG 116 beginning 10-1-05 when DRG 552 was added)
117	CARDIAC PACEMAKER REVISION EXCEPT DEVICE REPLACEMENT
118	CARDIAC PACEMAKER DEVICE REPLACEMENT
119	VEIN LIGATION & STRIPPING
120	OTHER CIRCULATORY SYSTEM OPERATING ROOM PROCEDURES
121*	CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION & CARDIOVASCULAR COMPLICATIONS, DISCHARGED ALIVE (prior to 10-1-97)
121*	CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION & MAJOR COMPLICATION, DISCHARGED ALIVE (beginning 10-1-97)
122*	CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION WITHOUT CARDIOVASCULAR COMPLICATION, DISCHARGED ALIVE (prior to 10-1-97)
122*	CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION WITHOUT MAJOR COMPLICATION, DISCHARGED ALIVE (beginning 10-1-97)
123	CIRCULATORY DISORDERS WITH ACUTE MYOCARDIAL INFARCTION, EXPIRED
124	CIRCULATORY DISORDERS EXCEPT ACUTE MYOCARDIAL INFARCTION, WITH CARDIAC CATHETER & COMPLEX DIAGNOSES
125	CIRCULATORY DISORDERS EXCEPT ACUTE MYOCARDIAL INFARCTION, WITH CARDIAC CATHETER WITHOUT COMPLEX DIAGNOSES
126	ACUTE & SUBACUTE ENDOCARDITIS
127	HEART FAILURE & SHOCK

Diagnosis Related Group (DRG)

128	DEEP VEIN THROMBOPHLEBITIS
129	CARDIAC ARREST, UNEXPLAINED
130	PERIPHERAL, VASCULAR DISORDERS WITH COMPLICATIONS, COMORBIDITIES
131	PERIPHERAL VASCULAR DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
132	ATHEROSCLEROSIS WITH COMPLICATIONS, COMORBIDITIES
133	ATHEROSCLEROSIS WITHOUT COMPLICATIONS, COMORBIDITIES
134	HYPERTENSION
135	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE >17 WITH COMPLICATIONS, COMORBIDITIES
136	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
137	CARDIAC CONGENITAL & VALVULAR DISORDERS AGE 0-17
138	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS WITH COMPLICATIONS, COMORBIDITIES
139	CARDIAC ARRHYTHMIA & CONDUCTION DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
140	ANGINA PECTORIS
141	SYNCOPE & COLLAPSE WITH COMPLICATIONS, COMORBIDITIES
142	SYNCOPE & COLLAPSE WITHOUT COMPLICATIONS, COMORBIDITIES
143	CHEST PAIN
144	OTHER CIRCULATORY SYSTEM DIAGNOSES WITH COMPLICATIONS, COMORBIDITIES
145	OTHER CIRCULATORY SYSTEM DIAGNOSES WITHOUT COMPLICATIONS, COMORBIDITIES
146	RECTAL RESECTION WITH COMPLICATIONS, COMORBIDITIES
147	RECTAL RESECTION WITHOUT COMPLICATIONS, COMORBIDITIES
148	MAJOR SMALL & LARGE BOWEL PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
149	MAJOR SMALL & LARGE BOWEL PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
150	PERITONEAL ADHESIOLYSIS WITH COMPLICATIONS, COMORBIDITIES
151	PERITONEAL ADHESIOLYSIS WITHOUT COMPLICATIONS, COMORBIDITIES
152	MINOR SMALL & LARGE BOWEL PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
153	MINOR SMALL & LARGE BOWEL PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
154	STOMACH, ESOPHAGEAL, & DUODENAL PROCEDURES AGE >17 WITH COMPLICATIONS, COMORBIDITIES
155	STOMACH, ESOPHAGEAL & DUODENAL PROCEDURES AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
156	STOMACH, ESOPHAGEAL & DUODENAL PROCEDURES AGE 0-17
157	ANAL & STOMAL PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
158	ANAL & STOMAL PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
159	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 WITH COMPLICATIONS, COMORBIDITIES
160	HERNIA PROCEDURES EXCEPT INGUINAL & FEMORAL AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
161	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 WITH COMPLICATIONS, COMORBIDITIES
162	INGUINAL & FEMORAL HERNIA PROCEDURES AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
163	HERNIA PROCEDURES AGE 0-17
164	APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITH COMPLICATIONS, COMORBIDITIES
165	APPENDECTOMY WITH COMPLICATED PRINCIPAL DIAGNOSIS WITHOUT COMPLICATIONS, COMORBIDITIES
166	APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITH COMPLICATIONS, COMORBIDITIES
167	APPENDECTOMY WITHOUT COMPLICATED PRINCIPAL DIAGNOSIS WITHOUT COMPLICATIONS, COMORBIDITIES
168	MOUTH PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
169	MOUTH PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
170	OTHER DIGESTIVE SYSTEM OPERATING ROOM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
171	OTHER DIGESTIVE SYSTEM OPERATING ROOM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
172	DIGESTIVE MALIGNANCY WITH COMPLICATIONS, COMORBIDITIES

Diagnosis Related Group (DRG)

173	DIGESTIVE MALIGNANCY WITHOUT COMPLICATIONS, COMORBIDITIES
174	GASTROINTESTINAL HEMORRHAGE WITH COMPLICATIONS, COMORBIDITIES
175	GASTROINTESTINAL HEMORRHAGE WITHOUT COMPLICATIONS, COMORBIDITIES
176	COMPLICATED PEPTIC ULCER
177	UNCOMPLICATED PEPTIC ULCER WITH COMPLICATIONS, COMORBIDITIES
178	UNCOMPLICATED PEPTIC ULCER WITHOUT COMPLICATIONS, COMORBIDITIES
179	INFLAMMATORY BOWEL DISEASE
180	GASTROINTESTINAL OBSTRUCTION WITH COMPLICATIONS, COMORBIDITIES
181	GASTROINTESTINAL OBSTRUCTION WITHOUT COMPLICATIONS, COMORBIDITIES
182	ESOPHAGITIS, GASTROENTERITIS, & MISCELLANEOUS DIGESTIVE DISORDERS AGE >17 WITH COMPLICATIONS, COMORBIDITIES
183	ESOPHAGITIS, GASTROENTERITIS, & MISCELLANEOUS DIGESTIVE DISORDERS AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
184	ESOPHAGITIS, GASTROENTERITIS, & MISCELLANEOUS DIGESTIVE DISORDERS AGE 0-17
185	DENTAL & ORAL DIS EXCEPT EXTRACTIONS & RESTORATIONS AGE >17
186	DENTAL & ORAL DIS EXCEPT EXTRACTIONS & RESTORATIONS, AGE 0-17
187	DENTAL EXTRACTIONS & RESTORATIONS
188	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE >17 WITH COMPLICATIONS, COMORBIDITIES
189	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
190	OTHER DIGESTIVE SYSTEM DIAGNOSES AGE 0-17
191	PANCREAS, LIVER & SHUNT PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
192	PANCREAS, LIVER & SHUNT PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
193	BILIARY TACT PROCEDURES EXCEPT ONLY TOTAL CHOLECYST WITH OR WITHOUT COMMON DUCT EXPLORATION WITH COMPLICATIONS, COMORBIDITIES
194	BILIARY TRACT PROCEDURES EXCEPT ONLY TOTAL CHOLECYST WITH OR WITHOUT COMMON DUCT EXPLORATION WITHOUT COMPLICATIONS, COMORBIDITIES
195	CHOLECYSTECTOMY WITH COMMON DUCT EXPLORATION WITH COMPLICATIONS, COMORBIDITIES
196	CHOLECYSTECTOMY WITH COMMON DUCT EXPLORATION WITHOUT COMPLICATIONS, COMORBIDITIES
197	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE WITHOUT COMMON DUCT EXPLORATION WITH COMPLICATIONS, COMORBIDITIES
198	CHOLECYSTECTOMY EXCEPT BY LAPAROSCOPE WITHOUT COMMON DUCT EXPLORATION WITHOUT COMPLICATIONS, COMORBIDITIES
199	HEPATOBIILIARY DIAGNOSTIC PROCEDURE FOR MALIGNANCY
200	HEPATOBIILIARY DIAGNOSTIC PROCEDURE FOR NON-MALIGNANCY
201	OTHER HEPATOBIILIARY OR PANCREAS OPERATING ROOM PROCEDURES
202	CIRRHOSIS & ALCOHOLIC HEPATITIS
203	MALIGNANCY OF HEPATOBIILIARY SYSTEM OR PANCREAS
204	DISORDERS OF PANCREAS EXCEPT MALIGNANCY
205	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS, ALCOHOLIC HEPATITIS WITH COMPLICATIONS, COMORBIDITIES
206	DISORDERS OF LIVER EXCEPT MALIGNANCY, CIRRHOSIS, ALCOHOLIC HEPATITIS WITHOUT COMPLICATIONS, COMORBIDITIES
207	DISORDERS OF THE BILIARY TRACT WITH COMPLICATIONS, COMORBIDITIES
208	DISORDERS OF THE BILIARY TRACT WITHOUT COMPLICATIONS, COMORBIDITIES
209*	MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF LOWER EXTREMITY (no DRG 209 beginning 10-1-05 when DRGs 544-545 were added)
210	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 WITH COMPLICATIONS, COMORBIDITIES
211	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
212	HIP & FEMUR PROCEDURES EXCEPT MAJOR JOINT AGE 0-17
213	AMPUTATION FOR MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE DISORDERS
214*	BACK & NECK PROCEDURES WITH COMPLICATIONS, COMORBIDITIES (prior to 10-1-97; no DRG 214 beginning 10-1-97 when DRGs 497-500 were added)
215*	BACK & NECK PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES (prior to 10-1-07; no DRG 215 beginning 10-1-97 when DRGs 497-500 were added)
216	BIOPSIES OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE

Diagnosis Related Group (DRG)

217	WOUND DEBRIDEMENT & SKIN GRAFT EXCEPT HAND, FOR MUSCULOSKELETAL & CONNECTIVE TISSUE DISORDERS AGE>17 WITH COMPLICATIONS, COMORBIDITIES
218	LOWER EXTREMITY & HUMERUS PROCEDURES EXCEPT HIP, FOOT, FEMUR AGE>17 COMPLICATIONS, COMORBIDITIES
219	LOWER EXTREMITY & HUMERUS PROCEDURES EXCEPT HIP, FOOT, FEMUR AGE>17 WITHOUT COMPLICATIONS, COMORBIDITIES
220	LOWER EXTREMITY & HUMERUS PROCEDURES EXCEPT HIP, FOOT, FEMUR AGE 0-17
221*	KNEE PROCEDURES WITH COMPLICATIONS, COMORBIDITIES (prior to 10-1-97; no DRG 221 beginning 10-1-97 when DRGs 501-503 were added)
222*	KNEE PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES (prior to 10-1-97; no DRG 222 beginning 10-1-97 when DRGs 501-503 were added)
223	MAJOR SHOULDER/ELBOW PROCEDURE, OR OTHER UPPER EXTREMITY PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
224	SHOULDER, ELBOW OR FOREARM PROCEDURE, EXCEPT MAJOR JOINT PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
225	FOOT PROCEDURES
226	SOFT TISSUE PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
227	SOFT TISSUE PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
228	MAJOR THUMB OR JOINT PROCEDURE, OR OTHER HAND OR WRIST PROCEDURE WITH COMPLICATIONS, COMORBIDITIES
229	HAND OR WRIST PROCEDURE, EXCEPT MAJOR JOINT PROCEDURE, WITHOUT COMPLICATIONS, COMORBIDITIES
230	LOCAL EXCISION & REMOVAL OF INTERNAL FIXATION DEVICES OF HIP & FEMUR
231*	LOCAL EXCISION & REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP & FEMUR (prior to 10-1-03; no DRG 231 beginning 10-1-03 and DRGs 537-538 were added)
232	ARTHROSCOPY
233	OTHER MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE OPERATING ROOM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
234	OTHER MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE OPERATING ROOM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
235	FRACTURES OF FEMUR
236	FRACTURES OF HIP & PELVIS
237	SPRAINS, STRAINS, & DISLOCATIONS OF HIP, PELVIS & THIGH
238	OSTEOMYELITIS
239	PATHOLOGICAL FRACTURES & MUSCULOSKELETAL & CONNECTIVE TISSUE MALIGNANCY
240	CONNECTIVE TISSUE DISORDERS WITH COMPLICATIONS, COMORBIDITIES
241	CONNECTIVE TISSUE DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
242	SEPTIC ARTHRITIS
243	MEDICAL BACK PROBLEMS
244	BONE DISEASES & SPECIFIC ARTHROPATHIES WITH COMPLICATIONS, COMORBIDITIES
245	BONE DISEASES & SPECIFIC ARTHROPATHIES WITHOUT COMPLICATIONS, COMORBIDITIES
246	NON-SPECIFIC ARTHROPATHIES
247	SIGNS & SYMPTOMS OF MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE
248	TENDINITIS, MYOSITIS & BURSITIS
249	AFTERCARE, MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE
250	FRACTURE, SPRAIN, STRAIN, & DISLOCATION OF FOREARM, HAND, FOOT AGE >17 WITH COMPLICATIONS, COMORBIDITIES
251	FRACTURE, SPRAIN, STRAIN, & DISLOCATION OF FOREARM, HAND, FOOT AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
252	FRACTURE, SPRAIN, STRAIN & DISLOCATION OF FOREARM, HAND, FOOT AGE 0-17
253	FRACTURE, SPRAIN, STRAIN & DISLOCATION OF UPPER ARM, LOWER LEG EXCEPT FOOT AGE >17 WITH COMPLICATIONS, COMORBIDITIES
254	FRACTURE, SPRAIN, STRAIN & DISLOCATION OF UPPER ARM, LOWER LEG, EXCEPT FOOT AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
255	FRACTURE, SPRAIN, STRAIN, & DISLOCATION OF UPPER ARM, LOWER LEG EXCEPT FOOT AGE 0-17
256	OTHER MUSCULOSKELETAL SYSTEM & CONNECTIVE TISSUE DIAGNOSIS
257	TOTAL MASTECTOMY FOR MALIGNANCY WITH COMPLICATIONS, COMORBIDITIES
258	TOTAL MASTECTOMY FOR MALIGNANCY WITHOUT COMPLICATIONS, COMORBIDITIES

Diagnosis Related Group (DRG)

259	SUBTOTAL MASTECTOMY FOR MALIGNANCY WITH COMPLICATIONS, COMORBIDITIES
260	SUBTOTAL MASTECTOMY FOR MALIGNANCY WITHOUT COMPLICATIONS, COMORBIDITIES
261	BREAST PROCEDURE FOR NON-MALIGNANCY EXCEPT BIOPSY & LOCAL EXCISION
262	BREAST BIOPSY & LOCAL EXCISION FOR NON-MALIGNANCY
263	SKIN GRAFT &/OR DEBRIDEMENT FOR SKIN ULCER OR CELLULITIS WITH COMPLICATIONS, COMORBIDITIES
264	SKIN GRAFT &/OR DEBRIDEMENT FOR SKIN ULCER OR CELLULITIS WITHOUT COMPLICATIONS, COMORBIDITIES
265	SKIN GRAFT &/OR DEBRIDEMENT EXCEPT FOR SKIN ULCER OR CELLULITIS WITH COMPLICATIONS, COMORBIDITIES
266	SKIN GRAFT &/OR DEBRIDEMENT EXCEPT FOR SKIN ULCER OR CELLULITIS WITHOUT COMPLICATIONS, COMORBIDITIES
267	PERIANAL & PILONIDAL PROCEDURES
268	SKIN, SUBCUTANEOUS TISSUE & BREAST PLASTIC PROCEDURES
269	OTHER SKIN, SUBCUTANEOUS TISSUE & BREAST PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
270	OTHER SKIN, SUBCUTANEOUS TISSUE & BREAST PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
271	SKIN ULCERS
272	MAJOR SKIN DISORDERS WITH COMPLICATIONS, COMORBIDITIES
273	MAJOR SKIN DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
274	MALIGNANT BREAST DISORDERS WITH COMPLICATIONS, COMORBIDITIES
275	MALIGNANT BREAST DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
276	NON-MALIGNANT BREAST DISORDERS
277	CELLULITIS AGE >17 WITH COMPLICATIONS, COMORBIDITIES
278	CELLULITIS AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
279	CELLULITIS AGE 0-17
280	TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE & BREAST AGE >17 WITH COMPLICATIONS, COMORBIDITIES
281	TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE & BREAST AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
282	TRAUMA TO THE SKIN, SUBCUTANEOUS TISSUE & BREAST AGE 0-17
283	MINOR SKIN DISORDERS WITH COMPLICATIONS, COMORBIDITIES
284	MINOR SKIN DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
285	AMPUTATION OF LOWER LIMB FOR ENDOCRINE, NUTRITION & METABOLIC DISORDERS
286	ADRENAL & PITUITARY PROCEDURES
287	SKIN GRAFTS & WOUND DEBRIDEMENT FOR ENDOCRINE, NUTRITION & METABOLIC DISORDERS
288	OPERATING ROOM PROCEDURES FOR OBESITY
289	PARATHYROID PROCEDURES
290	THYROID PROCEDURES
291	THYROGLOSSAL PROCEDURES
292	OTHER ENDOCRINE, NUTRITION & METABOLIC OPERATING ROOM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES
293	OTHER ENDOCRINE, NUTRITION & METABOLIC OPERATING ROOM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
294	DIABETES AGE >35
295	DIABETES AGE 0-35
296	NUTRITIONAL & MISCELLANEOUS METABOLIC DISORDERS AGE >17 WITH COMPLICATIONS, COMORBIDITIES
297	NUTRITIONAL & MISCELLANEOUS METABOLIC DISORDERS AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
298	NUTRITIONAL & MISCELLANEOUS METABOLIC DISORDERS AGE 0-17
299	INBORN ERRORS OF METABOLISM
300	ENDOCRINE DISORDERS WITH COMPLICATIONS, COMORBIDITIES
301	ENDOCRINE DISORDERS WITHOUT COMPLICATIONS, COMORBIDITIES
302	KIDNEY TRANSPLANT
303	KIDNEY, URETER & MAJOR BLADDER PROCEDURES FOR NEOPLASM
304	KIDNEY, URETER & MAJOR BLADDER PROCEDURES FOR NON-NEOPLASM WITH COMPLICATIONS, COMORBIDITIES

Diagnosis Related Group (DRG)

305 KIDNEY, URETER & MAJOR BLADDER PROCEDURES FOR NON-NEOPLASM
WITHOUT COMPLICATIONS, COMORBIDITIES

306 PROSTATECTOMY WITH COMPLICATIONS, COMORBIDITIES

307 PROSTATECTOMY WITHOUT COMPLICATIONS, COMORBIDITIES

308 MINOR BLADDER PROCEDURES WITH COMPLICATIONS, COMORBIDITIES

309 MINOR BLADDER PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES

310 TRANSURETHRAL PROCEDURES WITH COMPLICATIONS, COMORBIDITIES

311 TRANSURETHRAL PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES

312 URETHRAL PROCEDURES, AGE > 17 WITH COMPLICATIONS, COMORBIDITIES

313 URETHRAL PROCEDURES, AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES

314 URETHRAL PROCEDURES, AGE 0-17

315 OTHER KIDNEY & URINARY TRACT OPERATING ROOM PROCEDURES

316 RENAL FAILURE

317 ADMIT FOR RENAL DIALYSIS

318 KIDNEY & URINARY TRACT NEOPLASMS WITH COMPLICATIONS, COMORBIDITIES

319 KIDNEY & URINARY TRACT NEOPLASMS WITHOUT COMPLICATIONS, COMORBIDITIES

320 KIDNEY & URINARY TRACT INFECTIONS AGE >17 WITH COMPLICATIONS, COMORBIDITIES

321 KIDNEY & URINARY TRACT INFECTIONS AGE >17 WITHOUT COMPLICATIONS,
COMORBIDITIES

322 KIDNEY & URINARY TRACT INFECTIONS AGE 0-17

323 URINARY STONES WITH COMPLICATIONS, COMORBIDITIES, &/OR EXTRACORPOREAL SHOCK
WAVE LITHOTRIPSY

324 URINARY STONES WITHOUT COMPLICATIONS, COMORBIDITIES

325 KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE >17 WITH COMPLICATIONS,
COMORBIDITIES

326 KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE >17 WITHOUT COMPLICATIONS,
COMORBIDITIES

327 KIDNEY & URINARY TRACT SIGNS & SYMPTOMS AGE 0-17

328 URETHRAL STRICTURE AGE >17 WITH COMPLICATIONS, COMORBIDITIES

329 URETHRAL STRICTURE AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES

330 URETHRAL STRICTURE AGE 0-17

331 OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 WITH COMPLICATIONS,
COMORBIDITIES

332 OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE >17 WITHOUT COMPLICATIONS,
COMORBIDITIES

333 OTHER KIDNEY & URINARY TRACT DIAGNOSES AGE 0-17

334 MAJOR MALE PELVIC PROCEDURES WITH COMPLICATIONS, COMORBIDITIES

335 MAJOR MALE PELVIC PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES

336 TRANSURETHRAL PROSTATECTOMY WITH COMPLICATIONS, COMORBIDITIES

337 TRANSURETHRAL PROSTATECTOMY WITHOUT COMPLICATIONS, COMORBIDITIES

338 TESTES PROCEDURES, FOR MALIGNANCY

339 TESTES PROCEDURES, NON-MALIGNANCY AGE >17

340 TESTES PROCEDURES, NON-MALIGNANCY AGE 0-17

341 PENIS PROCEDURES

342 CIRCUMCISION AGE >17

343 CIRCUMCISION AGE 0-17

344 OTHER MALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURES FOR MALIGNANCY

345 OTHER MALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURES EXCEPT FOR
MALIGNANCY

346 MALIGNANCY, MALE REPRODUCTIVE SYSTEM, WITH COMPLICATIONS, COMORBIDITIES

347 MALIGNANCY, MALE REPRODUCTIVE SYSTEM, WITHOUT COMPLICATIONS, COMORBIDITIES

348 BENIGN PROSTATIC HYPERTROPHY WITH COMPLICATIONS, COMORBIDITIES

349 BENIGN PROSTATIC HYPERTROPHY WITHOUT COMPLICATIONS, COMORBIDITIES

350 INFLAMMATION OF THE MALE REPRODUCTIVE SYSTEM

351 STERILIZATION, MALE

352 OTHER MALE REPRODUCTIVE SYSTEM DIAGNOSES

353 PELVIC EVISCERATION, RADICAL HYSTERECTOMY & RADICAL VULVECTOMY

354 UTERINE, ADNEXA PROCEDURES FOR NON-OVARIAN/ADNEXAL MALIGNANCY
WITH COMPLICATIONS, COMORBIDITIES

355 UTERINE, ADNEXA PROCEDURES FOR NON-OVARIAN/ADNEXAL MALIGNANCY

Diagnosis Related Group (DRG)

WITHOUT COMPLICATIONS, COMORBIDITIES
356 FEMALE REPRODUCTIVE SYSTEM RECONSTRUCTIVE PROCEDURES
357 UTERINE & ADNEXA PROCEDURES FOR OVARIAN OR ADNEXAL MALIGNANCY
358 UTERINE & ADNEXA PROCEDURE FOR NON-MALIGNANCY WITH COMPLICATIONS,
COMORBIDITIES
359 UTERINE & ADNEXA PROCEDURE FOR NON-MALIGNANCY WITHOUT COMPLICATIONS,
COMORBIDITIES
360 VAGINA, CERVIX & VULVA PROCEDURES
361 LAPAROSCOPY & INCISIONAL TUBAL INTERRUPTION
362 ENDOSCOPIC TUBAL INTERRUPTION
363 DILATION & CURETTAGE, CONIZATION & RADIO-IMPLANT, FOR MALIGNANCY
364 DILATION & CURETTAGE, CONIZATION EXCEPT FOR MALIGNANCY
365 OTHER FEMALE REPRODUCTIVE SYSTEM OPERATING ROOM PROCEDURES
366 MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM WITH COMPLICATIONS, COMORBIDITIES
367 MALIGNANCY, FEMALE REPRODUCTIVE SYSTEM WITHOUT COMPLICATIONS, COMORBIDITIES
368 INFECTIONS, FEMALE REPRODUCTIVE SYSTEM
369 MENSTRUAL & OTHER FEMALE REPRODUCTIVE SYSTEM DISORDERS
370 CESAREAN SECTION WITH COMPLICATIONS, COMORBIDITIES
371 CESAREAN SECTION WITHOUT COMPLICATIONS, COMORBIDITIES
372 VAGINAL DELIVERY WITH COMPLICATING DIAGNOSES
373 VAGINAL DELIVERY WITHOUT COMPLICATING DIAGNOSES
374 VAGINAL DELIVERY WITH STERILIZATION &/OR DILATION & CURETTAGE
375 VAGINAL DELIVERY WITH OPERATING ROOM PROCEDURE EXCEPT STERILIZATION &/OR
DILATION & CURETTAGE
376 POSTPARTUM & POST ABORTION DIAGNOSES WITHOUT OPERATING ROOM PROCEDURE
377 POSTPARTUM & POST ABORTION DIAGNOSES WITH OPERATING ROOM PROCEDURE
378 ECTOPIC PREGNANCY
379 THREATENED ABORTION
380 ABORTION WITHOUT DILATION & CURETTAGE
381 ABORTION WITH DILATION & CURETTAGE, ASPIRATION CURETTAGE OR HYSTEROTOMY
382 FALSE LABOR
383 OTHER ANTEPARTUM DIAGNOSES WITH MEDICAL COMPLICATIONS
384 OTHER ANTEPARTUM DIAGNOSES WITHOUT MEDICAL COMPLICATIONS
385 NEONATES, DIED OR TRANSFERRED TO ANOTHER ACUTE CARE FACILITY
386 EXTREME IMMATURITY OR RESPIRATORY DISTRESS SYNDROME, NEONATE
387 PREMATUREITY WITH MAJOR PROBLEMS
388 PREMATUREITY WITHOUT MAJOR PROBLEMS
389 FULL TERM NEONATE WITH MAJOR PROBLEMS
390 NEONATE WITH OTHER SIGNIFICANT PROBLEMS
391 NORMAL NEWBORN
392 SPLENECTOMY AGE >17
393 SPLENECTOMY AGE 0-17
394 OTHER OPERATING ROOM PROCEDURES OF THE BLOOD AND BLOOD FORMING ORGANS
395 RED BLOOD CELL DISORDERS AGE >17
396 RED BLOOD CELL DISORDERS AGE 0-17
397 COAGULATION DISORDERS
398 RETICULOENDOTHELIAL & IMMUNITY DISORDERS WITH COMPLICATIONS, COMORBIDITIES
399 RETICULOENDOTHELIAL & IMMUNITY DISORDERS WITHOUT COMPLICATIONS,
COMORBIDITIES
400* LYMPHOMA & LEUKEMIA WITH MAJOR OPERATING ROOM PROCEDURE (prior to 10-1-03;
no DRG 400 beginning 10-1-03 when DRGs 539-540 were added)
401 LYMPHOMA & NON-ACUTE LEUKEMIA WITH OTHER OPERATING ROOM PROCEDURES WITH
COMPLICATIONS, COMORBIDITIES
402 LYMPHOMA & NON-ACUTE LEUKEMIA WITH OTHER OPERATING ROOM PROCEDURES WITHOUT
COMPLICATIONS, COMORBIDITIES
403 LYMPHOMA & NON-ACUTE LEUKEMIA WITH COMPLICATIONS, COMORBIDITIES
404 LYMPHOMA & NON-ACUTE LEUKEMIA WITHOUT COMPLICATIONS, COMORBIDITIES
405 ACUTE LEUKEMIA WITHOUT MAJOR OPERATING ROOM PROCEDURE AGE 0-17
406 MYELOPROLIFERATIVE DISORDER OR POORLY DIFFUSED NEOPLASMS WITH MAJOR
OPERATING ROOM PROCEDURES WITH COMPLICATIONS, COMORBIDITIES

Diagnosis Related Group (DRG)

407	MYELOPROLIFERATIVE DISORDER OR POORLY DIFFUSED NEOPLASMS WITH MAJOR OPERATING ROOM PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
408	MYELOPROLIFERATIVE DISORDER OR POORLY DIFFUSED NEOPLASMS WITH OTHER OPERATING ROOM PROCEDURES
409	RADIOTHERAPY
410	CHEMOTHERAPY WITHOUT ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS
411	HISTORY OF MALIGNANCY WITHOUT ENDOSCOPY
412	HISTORY OF MALIGNANCY WITH ENDOSCOPY
413	OTHER MYELOPROLIFERATIVE DISEASES OR POORLY DIFFUSED NEOPLASM DIAGNOSES WITH COMPLICATIONS, COMORBIDITIES
414	OTHER MYELOPROLIFERATIVE DISEASES OR POORLY DIFFUSED NEOPLASM DIAGNOSES WITHOUT COMPLICATIONS, COMORBIDITIES
415	OPERATING ROOM PROCEDURE FOR INFECTIOUS & PARASITIC DISEASES
416	SEPTICEMIA AGE >17
417	SEPTICEMIA AGE 0-17
418	POSTOPERATIVE & POST-TRAUMATIC INFECTIONS
419	FEVER OF UNKNOWN ORIGIN AGE >17 WITH COMPLICATIONS, COMORBIDITIES
420	FEVER OF UNKNOWN ORIGIN AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
421	VIRAL ILLNESS AGE >17
422	VIRAL ILLNESS & FEVER OF UNKNOWN ORIGIN AGE 0-17
423	OTHER INFECTIOUS & PARASITIC DISEASES DIAGNOSES
424	OPERATING ROOM PROCEDURE WITH PRINCIPAL DIAGNOSES OF MENTAL ILLNESS
425*	ACUTE ADJUSTMENT REACTIONS & DISTURBANCES OF PSYCHOSOCIAL DYSFUNCTION (prior to 10/01/99)
425*	ACUTE ADJUSTMENT REACTION & PSYCHOSOCIAL DYSFUNCTION (beginning 10/01/99)
426	DEPRESSIVE NEUROSES
427	NEUROSES EXCEPT DEPRESSIVE
428	DISORDERS OF PERSONALITY & IMPULSE CONTROL
429	ORGANIC DISTURBANCES & MENTAL RETARDATION
430	PSYCHOSES
431	CHILDHOOD MENTAL DISORDERS
432	OTHER MENTAL DISORDER DIAGNOSES
433	ALCOHOL/DRUG ABUSE OR DEPENDENCE, LEFT AGAINST MEDICAL ADVICE
434*	ALCOHOL/DRUG ABUSE OR DEPENDENCE, DETOXIFICATION OR OTHER SYMPTOM TREATMENT WITH COMPLICATIONS, COMORBIDITIES (prior to 10-1-01; no DRG 434 beginning 10-1-01 when DRGs 521-523 were added)
435*	ALCOHOL/DRUG ABUSE OR DEPENDENCE, DETOXIFICATION OR OTHER SYMPTOM TREATMENT WITHOUT COMPLICATIONS, COMORBIDITIES (prior to 10-1-01; no DRG 435 beginning 10-1-01 when DRGs 521-523 were added)
436*	ALCOHOL/DRUG DEPENDENCE WITH REHABILITATION THERAPY (prior to 10-1-01; no DRG 436 beginning 10-1-01 when DRGs 521-523 were added)
437*	ALCOHOL/DRUG DEPENDENCE, COMBINED REHABILITATION & DETOXIFICATION THERAPY (prior to 10-1-01; no DRG 437 beginning 10-1-01 when DRGs 521-523 were added)
439	SKIN GRAFTS FOR INJURIES
440	WOUND DEBRIDEMENTS FOR INJURIES
441	HAND PROCEDURES FOR INJURIES
442	OTHER OPERATING ROOM PROCEDURES FOR INJURIES WITH COMPLICATIONS, COMORBIDITIES
443	OTHER OPERATING ROOM PROCEDURES FOR INJURIES WITHOUT COMPLICATIONS, COMORBIDITIES
444	TRAUMATIC INJURY AGE >17 WITH COMPLICATIONS, COMORBIDITIES
445	TRAUMATIC INJURY AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES
446	TRAUMATIC INJURY AGE 0-17
447	ALLERGIC REACTIONS AGE >17
448	ALLERGIC REACTIONS AGE 0-17
449	POISONING & TOXIC EFFECTS OF DRUGS AGE >17 WITH COMPLICATIONS, COMORBIDITIES
450	POISONING & TOXIC EFFECTS OF DRUGS AGE >17 WITHOUT COMPLICATIONS, COMORBIDITIES

Diagnosis Related Group (DRG)

451 POISONING & TOXIC EFFECTS OF DRUGS AGE 0-17
452 COMPLICATIONS OF TREATMENT WITH COMPLICATIONS, COMORBIDITIES
453 COMPLICATIONS OF TREATMENT WITHOUT COMPLICATIONS, COMORBIDITIES
454 OTHER INJURY, POISONING & TOXIC EFFECT DIAGNOSES WITH COMPLICATIONS,
COMORBIDITIES
455 OTHER INJURY, POISONING & TOXIC EFFECT DIAGNOSES WITHOUT COMPLICATIONS,
COMORBIDITIES
456* BURNS, TRANSFERRED TO ANOTHER ACUTE CARE FACILITY (prior to 10-1-98; no
DRG 456 beginning 10-1-98 when DRGs 504-511 were added)
457* EXTENSIVE BURNS WITHOUT OPERATING ROOM PROCEDURE (prior to 10-1-98; no
DRG 457 beginning 10-1-98 when DRGs 504-511 were added)
458* NON-EXTENSIVE BURNS WITH SKIN GRAFT (prior to 10-1-98; no
DRG 458 beginning 10-1-98 when DRGs 504-511 were added)
459* NON-EXTENSIVE BURNS WITH WOUND DEBRIDEMENT OR OTHER OPERATING ROOM
PROCEDURE (prior to 10-1-98; no DRG 459 beginning 10-1-98 when DRGs 504-
511 were added)
460* NON-EXTENSIVE BURNS WITHOUT OPERATING ROOM PROCEDURE (prior to 10-1-98; no
DRG 460 beginning 10-1-98 when DRGs 504-511 were added)
461 OPERATING ROOM PROCEDURE WITH DIAGNOSES OF OTHER CONTACT WITH HEALTH
SERVICES
462 REHABILITATION
463 SIGNS & SYMPTOMS WITH COMPLICATIONS, COMORBIDITIES
464 SIGNS & SYMPTOMS WITHOUT COMPLICATIONS, COMORBIDITIES
465 AFTERCARE WITH HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS
466 AFTERCARE WITHOUT HISTORY OF MALIGNANCY AS SECONDARY DIAGNOSIS
467 OTHER FACTORS INFLUENCING HEALTH STATUS
468 EXTENSIVE OPERATING ROOM PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
469 PRINCIPAL DIAGNOSIS INVALID AS DISCHARGE DIAGNOSIS
470 UNGROUPABLE
471 BILATERAL OR MULTIPLE MAJOR JOINT PROCEDURES OF LOWER EXTREMITY
472* EXTENSIVE BURNS WITH OPERATING ROOM PROCEDURE (prior to 10-1-98; no DRG
472 beginning 10-1-05 when DRG 553 was added)
473 ACUTE LEUKEMIA WITHOUT MAJOR OPERATING ROOM PROCEDURE AGE >17
475 RESPIRATORY SYSTEM DIAGNOSIS WITH VENTILATOR SUPPORT
476 PROSTATIC OPERATING ROOM PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
477 NON-EXTENSIVE OPERATING ROOM PROCEDURE UNRELATED TO PRINCIPAL DIAGNOSIS
478* OTHER VASCULAR PROCEDURES WITH COMPLICATIONS, COMORBIDITIES (prior to 10-
1-05; no DRG 478 beginning 10-1-05 when DRGs 553-554 were added)
479 OTHER VASCULAR PROCEDURES WITHOUT COMPLICATIONS, COMORBIDITIES
480* LIVER TRANSPLANT (prior to 10-1-04)
480* LIVER TRANSPLANT AND/OR INTENSTINAL TRANSPLANT (beginning 10-1-04)
481 BONE MARROW TRANSPLANT
482 TRACHEOSTOMY FOR FACE, MOUTH & NECK DIAGNOSES
483* TRACHEOSTOMY EXCEPT FOR FACE, MOUTH, & NECK DIAGNOSES (prior to 10-1-02)
483* TRACHEOSTOMY WITH MECHANICAL VENTILATION 96+ HOURS OR PRINCIPAL DIAGNOSIS
EXCEPT FACE, MOUTH, & NECK (beginning 10-1-02, used to 10-1-04)
483* TRACHEOSTOMY WITH MECHANICAL VENTILATION 96+ HOURS OR PRINCIPAL DIAGNOSIS
EXCEPT FACE, MOUTH, AND NECK DIAGNOSES (prior to 10-1-04; no DRG 483
beginning 10-1-04 when DRGs 541-542 were added)
484 CRANIOTOMY FOR MULTIPLE SIGNIFICANT TRAUMA
485 LIMB REATTACHMENT, HIP AND FEMUR PROCEDURE FOR MULTIPLE SIGNIFICANT TRAUMA
486 OTHER OPERATING ROOM PROCEDURES FOR MULTIPLE SIGNIFICANT TRAUMA
487 OTHER MULTIPLE SIGNIFICANT TRAUMA
488 HIV WITH EXTENSIVE OPERATING ROOM PROCEDURE
489 HIV WITH MAJOR RELATED CONDITION
490 HIV WITH OR WITHOUT OTHER RELATED CONDITION
491 MAJOR JOINT & LIMB REATTACHMENT PROCEDURES OF UPPER EXTREMITY
492* CHEMOTHERAPY W/ ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS (prior to 10-1-03)
492* CHEMOTHERAPY W/ ACUTE LEUKEMIA AS SECONDARY DIAGNOSIS OR WITH USE OF HIGH-
DOSE CHEMOTHERAPY AGENT (beginning 10-1-03)

Diagnosis Related Group (DRG)

- 493 LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT COMMON DUCT EXPLORATION WITH COMPLICATIONS, COMORBIDITIES
- 494 LAPAROSCOPIC CHOLECYSTECTOMY WITHOUT COMMON DUCT EXPLORATION WITHOUT COMPLICATIONS, COMORBIDITIES
- 495 LUNG TRANSPLANT
- 496* COMBINED ANTERIOR/POSTERIOR SPINAL FUSION (added 10-1-97)
- 497* SPINAL FUSION WITH COMPLICATIONS AND COMORBIDITIES (between 10-1-97 and 10-1-01)
- 497* SPINAL FUSION EXCEPT CERVICAL WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 498* SPINAL FUSION WITHOUT COMPLICATIONS AND COMORBIDITIES (between 10-1-97 and 10-1-01)
- 498* SPINAL FUSION EXCEPT CERVICAL WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 499* BACK & NECK PROCEDURES EXCEPT SPINAL FUSION WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-97)
- 500* BACK & NECK PROCEDURES EXCEPT SPINAL FUSION WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-97)
- 501* KNEE PROCEDURES W PDX OF INFECTION WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-97)
- 502* KNEE PROCEDURES W PDX OF INFECTION WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-97)
- 503* KNEE PROCEDURES WITHOUT PDX OF INFECTION (added 10-1-97)
- 504* EXTENSIVE 3rd DEGREE BURNS WITH SKIN GRAFT (added 10-1-98, used to 10-1-04)
- 504* EXTENSIVE BURNS OR FULL THICKNESS BURNS WITH MECHANICAL VENTILATION 96+ HOURS WITH SKIN GRAFT (beginning 10-1-04)
- 505* EXTENSIVE BURNS OR FULL THICKNESS BURNS WITHOUT SKIN GRAFT (added 10-1-98, used to 10-1-04)
- 505* EXTENSIVE BURNS OR FULL THICKNESS BURNS WITH MECHANICAL VENTILATION 96+ HOURS WITHOUT SKIN GRAFT (beginning 10-1-04)
- 506* FULL THICKNESS BURN WITH SKIN GRAFT OR INHALATION INJURY WITH CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 507* FULL THICKNESS BURN WITH SKIN GRAFT OR INHALATION INJURY WITHOUT CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 508* FULL THICKNESS BURN WITHOUT SKIN GRAFT OR INHALATION INJURY WITH CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 509* FULL THICKNESS BURN WITHOUT SKIN GRAFT OR INHALATION INJURY WITHOUT CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 510* NON-EXTENSIVE BURNS WITH CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 511* NON-EXTENSIVE BURNS WITHOUT CC OR SIGNIFICANT TRAUMA (added 10-1-98)
- 512* SIMULTANEOUS PANCREAS/KIDNEY TRANSPLANT (added 10-1-01)
- 513* PANCREAS TRANSPLANTS (added 10-1-01)
- 514* CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION (added 10-1-01; no DRG 514 beginning 10-1-03 when replaced by DRG 535-DRG 536)
- 515* CARDIAC DEFIBRILLATOR IMPLANT WITHOUT CARDIAC CATHETERIZATION (added 10-1-01)
- 516* PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITH ACUTE MYOCARDIAL INFARCTION (added 10-1-01; no DRG 516 beginning 10-1-05 when DRG 555 was added)
- 517* PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITHOUT ACUTE MYOCARDIAL INFARCTION, WITH CORONARY ARTERY STENT IMPLANT (added 10-1-01; no DRG 517 beginning 10-1-05 when DRG 556 was added)
- 518* PERCUTANEOUS CARDIOVASCULAR PROCEDURES WITHOUT ACUTE MYOCARDIAL INFARCTION, WITHOUT CORONARY ARTERY STENT IMPLANT (added 10-1-01)
- 519* CERVICAL SPINAL FUSION WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 520* CERVICAL SPINAL FUSION WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 521* ALCOHOL/DRUG ABUSE OR DEPENDENCE WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 522* ALCOHOL/DRUG ABUSE OR DEPENDENCE WITH REHABILITATION THERAPY WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-01)

Diagnosis Related Group (DRG)

- 523* ALCOHOL/DRUG ABUSE OR DEPENDENCE WITHOUT REHABILITATION THERAPY WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-01)
- 524* TRANSIENT ISCHEMIA (added 10-1-02)
- 525* HEART ASSIST SYSTEM IMPLANT (added 10-1-02, used to 10-1-04)
- 525* OTHER HEART ASSIST SYSTEM IMPLANT (beginning 10-1-04)
- 526* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH DRUG-ELUDING STENT WITH ACUTE MYOCARDIAL INFARCTION (added 04-1-03; no DRG 526 beginning 10-1-05 when DRG 557 was added)
- 527* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH DRUG-ELUDING STENT WITHOUT ACUTE MYOCARDIAL INFARCTION (added 04-1-03; no DRG 527 beginning 10-1-05 when DRG 558 was added)
- 528* INTRA CRANIAL VASCULAR PROCEDURE WITH PRINCIPAL DIAGNOSIS OF HEMORRHAGE (added 10-1-03)
- 529* VENTRICULAR SHUNT PROCEDURES WITH CC (added 10-1-03)
- 530* VENTRICULAR SHUNT PROCEDURES WITHOUT CC (added 10-1-03)
- 531* SPINAL PROCEDURES WITH CC (added 10-1-03)
- 532* SPINAL PROCEDURES WITHOUT CC (added 10-1-03)
- 533* EXTRACRANIAL VASCULAR PROCEDURES WITH CC (added 10-1-03)
- 534* EXTRACRANIAL VASCULAR PROCEDURES WITHOUT CC (added 10-1-03)
- 535* CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION WITH ACUTE MYOCARDIAL INFARCTION (AMI), HEART FAILURE OR SHOCK (added 10-1-03)
- 536* CARDIAC DEFIBRILLATOR IMPLANT WITH CARDIAC CATHETERIZATION WITHOUT ACUTE MYOCARDIAL INFARCTION (AMI), HEART FAILURE OR SHOCK (added 10-1-03)
- 537* LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR WITH CC (added 10-1-03)
- 538* LOCAL EXCISION AND REMOVAL OF INTERNAL FIXATION DEVICES EXCEPT HIP AND FEMUR WITHOUT CC (added 10-1-03)
- 539* LYMPHOMA AND LEUKEMIA WITH MAJOR O.R. PROCEDURE WITH CC (added 10-1-03)
- 540* LYMPHOMA AND LEUKEMIA WITH MAJOR O.R. PROCEDURE WITHOUT CC (added 10-1-03)
- 541* ECMO OR TRACHEOSTOMY WITH MECHANICAL VENTILATION 96+ HOURS OR PRINCIPAL DIAGNOSES EXCEPT FACE, MOUTH AND NECK DIAGNOSES WITH MAJOR OPERATING ROOM PROCEDURE (added 10-1-04)
- 542* TRACHEOSTOMY WITH MECHANICAL VENTILATION 96+ HOURS OR PRINCIPAL DIAGNOSIS EXCEPT FACE, MOUTH AND NECK DIAGNOSES WITHOUT MAJOR OPERATING ROOM PROCEDURE (added 10-1-04)
- 543* CRANIOTOMY WITH IMPLANT OF CHEMO AGENT OR ACUTE COMPLEX CNS PRINCIPAL DIAGNOSIS (added 10-1-04)
- 544* MAJOR JOINT REPLACEMENT OR REATTACHMENT OF LOWER EXTREMITY (added 10-1-05)
- 545* REVISION OF HIP OR KNEE REPLACEMENT (added 10-1-05)
- 546* SPINAL FUSIONS EXCEPT CERVICAL WITH CURVATURE OF THE SPINE OR MALIGNANCY (added 10-1-05)
- 547* CORONARY BYPASS WITH CARDIAC CATHETERIZATION WITH MCV DIAGNOSIS (added 10-1-05)
- 548* CORONARY BYPASS WITH CARDIAC CATHETERIZATION WITHOUT MCV DIAGNOSIS (added 10-1-05)
- 549* CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITH MCV DIAGNOSIS (added 10-1-05)
- 550* CORONARY BYPASS WITHOUT CARDIAC CATHETERIZATION WITHOUT MCV DIAGNOSIS (added 10-1-05)
- 551* PERMANENT CARDIAC PACEMAKER IMPLANT WITH MCV DIAGNOSIS OR AICD LEAD OR GENERATOR (added 10-1-05)
- 552* OTHER PERMANENT CARDIAC PACEMAKER IMPLANT WITHOUT MCV DIAGNOSIS (added 10-1-05)
- 553* OTHER VASCULAR PROCEDURES WITH COMPLICATIONS AND COMORBIDITIES (added 10-1-05)
- 554* OTHER VASCULAR PROCEDURES WITHOUT COMPLICATIONS AND COMORBIDITIES (added 10-1-05)
- 555* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH MCV DIAGNOSIS (added 10-1-05)
- 556* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH NON DRUG-ELUTING STENT WITHOUT MCV DIAGNOSIS (added 10-1-05)

Diagnosis Related Group (DRG)

- 557* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH NON DRUG-ELUTING STENT WITH MCV
DIAGNOSIS (added 10-1-05)
- 558* PERCUTANEOUS CARDIOVASCULAR PROCEDURE WITH NON DRUG-ELUTING STENT WITH MCV
DIAGNOSIS (added 10-1-05)
- 559* ACUTE ISCHEMIC STROKE WITH USE OF THROMBOLYTIC AGENT (added 10-1-05)

*Change made in DRG classification. Hospitals provided the Office of Health Care Statistics (OHCS) with ICD-9-CM codes, rather than DRGs, so there was no need for the hospitals to be aware of DRG changes. The DRG was assigned by OHCS using 3M software (reference given on page 3) which classified the hospital discharge into a DRG based on the ICD-9-CM codes and other data such as age. OHCS accounted for DRG changes by using the DRG definitions which applied to the date of hospital discharge.

Major Diagnosis Category (MDC) *

- 0 = Ungroupable
- 1 = Nervous System
- 2 = Eye
- 3 = Ear, Nose, Mouth & Throat
- 4 = Respiratory System
- 5 = Circulatory System
- 6 = Digestive System
- 7 = Hepatobiliary System & Pancreas
- 8 = Musculoskeletal System & Connective Tissue
- 9 = Skin, Subcutaneous Tissue & Breast
- 10 = Endocrine, Nutritional & Metabolic System
- 11 = Kidney & Urinary Tract
- 12 = Male Reproductive System
- 13 = Female Reproductive System
- 14 = Pregnancy, Childbirth & the Puerperium
- 15 = Newborn & Other Neonates (Perinatal Period)
- 16 = Blood and Blood-Forming Disorders
- 17 = Myeloproliferative DDs (Diff Neoplasms)
- 18 = Infectious and Parasitic DDs
- 19 = Mental Diseases and Disorders
- 20 = Alcohol/Drug Use or Induced Mental Disorders
- 21 = Injuries, Poisoning and Toxic Effect of Drugs
- 22 = Burns
- 23 = Factors Influencing Health Status
- 24 = Multiple Significant Trauma
- 25 = Human Immunodeficiency Virus Infection

*Patients having heart, liver, lung, simultaneous pancreas/kidney, pancreas, or bone marrow transplants, or tracheostomies, traditionally categorized as PRE MDC (0), are assigned by the DRG Grouper into the following DRGs independent of the MDC of the principal diagnosis: 476, 477, 480-483, 495, 512, 513. DRGs (468,469,470) associated with all MDCs are assigned independent of the MDC of the principal diagnosis if the diagnosis is valid. Otherwise, this is the traditional Health Care Financing Administration (HCFA) MDC.

Total Charge

Total dollars and cents amount charged for the encounter (with 2 decimal digits).

blank = Not reported

Emergency Department Charge

Sum of dollar and cent amounts charged for the encounter using the National Uniform Billing Committee's (NUBC) revenue codes 450 and 451 (with 2 decimal digits).

blank = Not reported

Primary Payer Category

- 01 = Medicare
- 02 = Medicaid
- 03 = Other government
- 04 = Blue Cross/Blue Shield
- 05 = Other commercial
- 06 = Managed care
- 07 = Self pay
- 08 = Industrial and worker's compensation
- 09 = Charity/Unclassified
- 10 = Unknown
- 13 = CHIP (Children's Health Insurance Plan)
- 99 = Not reported

Secondary Payer Category Third Payer Category

Descriptions are the same as primary payer category.

Third Payer Category

Descriptions are the same as primary payer category.

Patient's Relationship to the First Insured Person

- 1 = Patient is the named insured
- 2 = Spouse
- 3 = Natural Child/insured has financial responsibility
- 4 = Natural Child/insured does not have financial responsibility
- 5 = Step Child
- 6 = Foster Child
- 7 = Ward of the Court (Patient is ward of the insured as a result of a court order.)
- 8 = Employee (The patient is employed by the named insured.)
- 9 = Unknown
- 10 = Handicapped Dependent (Dependent child whose coverage extends beyond normal termination age limits as a result of laws or agreements extending coverage.)
- 11 = Organ Donor (Code is used in cases where bill is submitted for care given to organ donor where such care is paid by the receiving patient's insurance coverage.)
- 12 = Cadaver Donor (Code is used where bill is submitted for procedures performed on a cadaver donor where such procedures are paid by the receiving patient's insurance coverage.)
- 13 = Grandchild
- 14 = Niece or Nephew
- 15 = Injured Plaintiff (Patient is claiming insurance as a result of injury covered by insured.)
- 16 = Sponsored Dependent (Individual not normally covered by insurance coverage but coverage has been specially arranged to include relationships such as grandparent or former spouse that would require further investigation by the payer.)
- 17 = Minor Dependent of a Minor Dependent (Code is used where patient is a minor and a dependent of another minor who in turn is a dependent, although not a child, of the insured.)
- 18 = Parent
- 19 = Grandparent

20 = Life Partner
blank = Not reported

Outlier, Total Charge

0 = No
1 = Yes

NOTE: A charge is an outlier if it is above 2.5 standard deviations from the mean of facility charges. Means and standard deviations are APR-DRG specific and calculated at the state level for a calendar year.

Outlier, Length of Stay in hours

0 = No
1 = Yes

NOTE: A length of stay is an outlier if it is above 2.5 standard deviations from the mean of the length of stay. Means and standard deviations are APR-DRG specific and calculated at the state level for a calendar year.

Encounter Quarter

1 = First Quarter (January 1 to March 31)
2 = Second Quarter (April 1 to June 30)
3 = Third Quarter (July 1 to September 30)
4 = Fourth Quarter (October 1 to December 31)

Record ID Number

A unique number for each encounter, which is also unique across all years that ED data are available.

Encounter Type

o = ED Outpatient Visit
i = ED Inpatient Admission

Principal Diagnostic Category

	<u>ICD-9 Range</u>
1 = Diabetes	250.0-250.9
2 = Otitis media and Eustachian tube disorders	381-382
3 = Heart dis. excl. ischemic	391-392.0,393-398,402,404,415,416,420-429
4 = Acute upper respiratory inf., excl. pharyngitis	460-461,463-466
5 = Acute pharyngitis	462
6 = Pneumonia	480-486
7 = Chronic and unspecified bronchitis	490-491
8 = Asthma	493
9 = Noninfectious enteritis and colitis	555-558
10 = Urinary tract infection, site not specified	599.0
11 = Dorsopathies	720-724
12 = Rheumatism, excluding back	725-729
13 = Convulsions	780.3
14 = Headache and migraine	784.0,346.90
15 = Chest pain	786.5
16 = Abdominal pain	789.0
17 = Fractures, excluding lower limb	800-819
18 = Fracture of lower limb	820-829
19 = Sprains and strains, excluding ankle and back	840-844,845.1,848
20 = Sprains and strains of ankle	845.0
21 = Sprains and strains of back	846-847

22 = Open wound of head	870-873
23 = Open wound, excluding head	874-897
24 = Superficial injury	910-919
25 = Contusion with intact skin surface	920-924
99 = All other	

E-Code

Supplementary classification of External Causes of Injury and Poisoning. Refer to *International Classification of Diseases (9th Revision): Clinical Modification* for description.

There is an "implied" decimal point between the 3rd and 4th digit (decimal point is part of ICD-9-CM E-code but has been stripped out of data).

Blank = Not reported

The ICD-9-CM E-codes can be looked up on the Internet at Yaki Technologies' Website
www.eicd.com/eicdmain.htm.

Admission Hour

The hour during which the patient arrived at the Emergency Department (using the 24 hour clock format).

Patient Severity Subclass Value

- 0 = No value assigned (record is ungroupable into a APR-DRG)
- 1 = Minor severity of illness subclass
- 2 = Moderate severity of illness subclass
- 3 = Major severity of illness subclass
- 4 = Extreme severity of illness subclass

Note: Patient severity subclass value should be used as a subcategory of the APR-DRG.

Patient Risk of Mortality Value

- 0 = No value assigned (record is ungroupable into a APR-DRG)
- 1 = Minor risk of mortality
- 2 = Moderate risk of mortality
- 3 = Major risk of mortality
- 4 = Extreme risk of mortality

Note: Patient risk of mortality value should be used as a subcategory of the APR-DRG.

**All Patient Refined Diagnosis Related Group (APR-DRG)
Version 20.0 (2005)**

001 Liver transplant
002 Heart &/or lung transplant
003 Bone marrow transplant
004 Tracheostomy with long term mechanical ventilation w extensive procedure
005 Tracheostomy with long term mechanical ventilation w/o extensive procedure
006 Pancreas transplant
020 Craniotomy for trauma
021 Craniotomy except for trauma
022 Ventricular shunt procedures
023 Spinal procedures
024 Extracranial vascular procedures
026 Other nervous system and related procedures
040 Spinal disorders & injuries
041 Nervous system malignancy
042 Degenerative nervous system disorders exc mult sclerosis
043 Multiple sclerosis & other demyelinating diseases
044 Intracranial hemorrhage
045 CVA & precerebral occlusion w infarct
046 Nonspecific CVA & precerebral occlusion w/o infarct
047 Transient ischemia
048 Peripheral, cranial & autonomic nerve disorders
049 Bacterial & tuberculous infections of nervous system
050 Non-bacterial infections of nervous system exc viral meningitis
051 Viral meningitis
052 Nontraumatic stupor & coma
053 Seizure
054 Migraine & other headaches
055 Head trauma w coma >1 hr or hemorrhage
056 Brain contusion/laceration & complicated skull fx, coma <1 hr or no coma
057 Concussion, closed skull fx nos, uncomp intracr injury, coma <1 hr or no coma
058 Other disorders of nervous system
070 Orbital procedures
073 Eye procedures except orbit
080 Acute major eye infections
082 Eye disorders except major infections
089 Major cranial/facial bone procedures
090 Major larynx & tracheal procedures
091 Other major head & neck procedures
092 Facial bone procedures except major cranial/facial bone procedures
093 Sinus & mastoid procedures
095 Cleft lip & palate repair
097 Tonsil & adenoid procedures
098 Other ear, nose, mouth & throat procedures
110 Ear, nose, mouth, throat cranial/facial malignancies
111 Vertigo & other labyrinth disorders
113 Infections of upper respiratory tract
114 Dental & oral disease
115 Other ear, nose, mouth, throat & cranial/facial diagnoses
120 Major respiratory & chest procedures
121 Other respiratory & chest procedures
130 Respiratory system diagnosis w ventilator support 96+ hours
131 Cystic fibrosis - pulmonary disease
132 Bpd & oth chronic respiratory dis arising in perinatal period
133 Pulmonary edema & respiratory failure
134 Pulmonary embolism

**All Patient Refined Diagnosis Related Group (APR-DRG)
Version 20.0 (2005)**

135 Major chest & respiratory trauma
136 Respiratory malignancy
137 Major respiratory infections & inflammations
138 Bronchiolitis & rsv pneumonia
139 Other pneumonia
140 Chronic obstructive pulmonary disease
141 Asthma
142 Interstitial lung disease
143 Other respiratory diagnoses except signs, symptoms & minor diagnoses
144 Respiratory system signs, symptoms & other diagnoses
160 Major cardiothoracic repair of heart anomaly
161 Cardiac defibrillator & heart assist implant
162 Cardiac valve procedures w cardiac catheterization
163 Cardiac valve procedures w/o cardiac catheterization
165 Coronary bypass w cardiac cath or percutaneous cardiac procedure
166 Coronary bypass w/o cardiac cath or percutaneous cardiac procedure
167 Other cardiothoracic procedures
169 Major thoracic & abdominal vascular procedures
170 Permanent cardiac pacemaker implant w AMI, heart failure or shock
171 Perm cardiac pacemaker implant w/o AMI, heart failure or shock
173 Other vascular procedures
174 Percutaneous cardiovascular procedures w AMI
175 Percutaneous cardiovascular procedures w/o AMI
176 Cardiac pacemaker & defibrillator device replacement
177 Cardiac pacemaker & defibrillator revision except device replacement
180 Other circulatory system procedures
190 Acute myocardial infarction
191 Cardiac catheterization w circ disord exc ischemic heart disease
192 Cardiac catheterization for ischemic heart disease
193 Acute & subacute endocarditis
194 Heart failure
196 Cardiac arrest
197 Peripheral & other vascular disorders
198 Angina pectoris & coronary atherosclerosis
199 Hypertension
200 Cardiac structural & valvular disorders
201 Cardiac arrhythmia & conduction disorders
203 Chest pain
204 Syncope & collapse
205 Cardiomyopathy
206 Malfunction, reaction & comp of cardiac/vasc device or proc
207 Other circulatory system diagnoses
220 Major stomach, esophageal & duodenal procedures
221 Major small & large bowel procedures
222 Other stomach, esophageal & duodenal procedures
223 Other small & large bowel procedures
224 Peritoneal adhesiolysis
225 Appendectomy
226 Anal procedures
227 Hernia procedures except inguinal, femoral & umbilical
228 Inguinal, femoral & umbilical hernia procedures
229 Other digestive system & abdominal procedures
240 Digestive malignancy
241 Peptic ulcer & gastritis
242 Major esophageal disorders
243 Other esophageal disorders
244 Diverticulitis & diverticulosis
245 Inflammatory bowel disease

**All Patient Refined Diagnosis Related Group (APR-DRG)
Version 20.0 (2005)**

246 Gastrointestinal vascular insufficiency
247 Intestinal obstruction
248 Major gastrointestinal & peritoneal infections
249 Nonbacterial gastroenteritis, nausea & vomiting
251 Abdominal pain
252 Malfunction, reaction & complication of GI device or procedure
253 Other & unspecified gastrointestinal hemorrhage
254 Other digestive system diagnosis
260 Major pancreas, liver & shunt procedures
261 Major biliary tract procedures
262 Cholecystectomy except laparoscopic
263 Laparoscopic cholecystectomy
264 Other hepatobiliary & pancreas procedures
279 Hepatic coma & other major acute liver disorders
280 Alcoholic liver disease
281 Malignancy of hepatobiliary system & pancreas
282 Disorders of pancreas except malignancy
283 Other disorders of liver
284 Disorders of the gall bladder & biliary tract
301 Hip joint replacement
302 Knee joint replacement
303 Dorsal & lumbar fusion proc for curvature of back
304 Dorsal & lumbar fusion proc except for curvature of back
305 Amputation of lower limb except toes
308 Hip & femur procedures for trauma except joint replacement
309 Hip & femur procedures for nontrauma except joint replacement
310 Intervertebral disc excision & decompression
312 Skin graft except hand, for musculoskeletal & connective tissue diagnosis
313 Knee & lower leg procedures except foot
314 Foot & toe procedures
315 Shoulder, elbow & forearm procedures
316 Hand & wrist procedures
317 Tendon, muscle & other soft tissue procedures
320 Other musculoskeletal system & connective tissue procedures
321 Cervical spinal fusion & other back/neck procedures except disc excision/dec
340 Fracture of femur
341 Fracture of pelvis or dislocation of hip
342 Fracture or dislocation except femur, pelvis & back
343 Musculoskeletal malignancy & pathological fractures d/t muscskel malig
344 Osteomyelitis, septic arthritis & other musculoskeletal infections
346 Connective tissue disorders
347 Other back & neck disorders, fractures & injuries
349 Malfunction, reaction & complications of orthopedic device or procedure
351 Other musculoskeletal system & connective tissue diagnoses
361 Skin graft for skin & subcutaneous tissue diagnoses
362 Mastectomy procedures
363 Breast procedures except mastectomy
364 Other skin, subcutaneous tissue & breast procedures
380 Skin ulcers
381 Major skin disorders
382 Malignant breast disorders
383 Cellulitis & other bacterial skin infections
384 Contusion, open wound & other trauma to skin & subcutaneous tissue
385 Other skin, subcutaneous tissue & breast disorders
401 Pituitary & adrenal procedures
403 Procedures for obesity
404 Thyroid, parathyroid & thyroglossal procedures
405 Other procedures for endocrine, nutrititonal & metabolic disorders
420 Diabetes

**All Patient Refined Diagnosis Related Group (APR-DRG)
Version 20.0 (2005)**

421 Malnutrition, failure to thrive & other nutritional disorders
422 Hypovolemia & electrolyte disorders
423 Inborn errors of metabolism
424 Other endocrine disorders
440 Kidney transplant
441 Major bladder procedures
442 Kidney & urinary tract procedures for malignancy
443 Kidney & urinary tract procedures for nonmalignancy
444 Renal dialysis access device procedure only
445 Other bladder procedures
446 Urethral & transurethral procedures
447 Other kidney, urinary tract & related procedures
460 Renal failure
461 Kidney & urinary tract malignancy
462 Nephritis & nephrosis
463 Kidney & urinary tract infections
465 Urinary stones & acquired upper urinary tract obstruction
466 Malfunction, reactions & comp of genitourinary device or procedure
468 Other kidney & urinary tract diagnoses, signs & symptoms
480 Major male pelvic procedures
481 Penis procedures
482 Transurethral prostatectomy
483 Testes & scrotal procedures
484 Other male reproductive system & related procedures
500 Malignancy, male reproductive system
501 Male reproductive system diagnoses except malignancy
510 Pelvic evisceration, radical hysterectomy & radical vulvectomy
511 Uterine & adnexa procedures for ovarian & adnexal malignancy
512 Uterine & adnexa procedures for non-ovarian & non-adnexal malignancy
513 Uterine & adnexa procedures for non-malignancy except leiomyoma
514 Female reproductive system reconstructive procedures
517 Dilatation & curettage for non-obstetric diagnoses
519 Uterine & adnexa procedures for leiomyoma
530 Female reproductive system malignancy
531 Female reproductive system infections
532 Menstrual & other female reproductive system disorders
540 Cesarean delivery
541 Vaginal delivery w sterilization &/or D&C
542 Vaginal delivery w complicating proc except sterilization &/or D&C
544 D&C, aspiration curettage or hysterotomy for obstetric diagnoses
560 Vaginal delivery
561 Postpartum & post abortion diagnoses w/o procedure
563 Threatened abortion
564 Abortion w/o D&C, aspiration curettage or hysterotomy
565 False labor
566 Other antepartum diagnoses
580 Neonate, transferred <5 days old, not born here
581 Neonate, transferred <5 days old, born here
583 Neonate, w ecmo
588 Neonate bwt <1500 g with major procedure
589 Neonate bwt <500 g
591 Neonate, birthwt 500,749g w/o major procedure
593 Neonate, birthwt 750g-999g w/o major procedure
602 Neonate, birthwt 1000-1249g w respiratory distress syndrome or major anomaly
603 Neonate, birthwt 1000-1249g w or w/o other significant condition
611 Neonate, birthwt 1500-1999g w major anomaly
612 Neonate, birthwt 1500-1999g w respiratory distress syndrome/oth maj resp cond
613 Neonate, birthwt 1500-1999g w congenital or perinatal infections
614 Neonate, birthwt 1500-1999g w or w/o other significant conditions

**All Patient Refined Diagnosis Related Group (APR-DRG)
Version 20.0 (2005)**

621 Neonate, birthwt 2000-2499g w major anomaly
622 Neonate, birthwt 2000-2499g w respiratory distress syndrome
623 Neonate, birthwt 2000-2499g w congenital or perinatal infections
625 Neonate, birthwt 2000-2499g, born here, w other significant condition
626 Neonate, bwt 2000-2499g, born here, normal NB & NB w other prob
630 Neonate, birthwt >2499g w major cardiovascular procedure
631 Neonate, birthwt >2499g w other major procedure
633 Neonate, birthwt >2499g w major anomaly
634 Neonate, birthwt >2499g w respiratory distress syndrome/oth maj resp cond
636 Neonate, birthwt >2499g w congenital/perinatal infections
639 Neonate, birthwt >2499g, born here, w other significant condition
640 Neonate, bwt >2499g, normal NB & NB w other problems
650 Splenectomy
651 Other procedures of blood & blood forming organs
660 Major hematologica/immunologic diagnoses exce sickle cell crisis & coag
661 Coagulation & platelet disorders
662 Sickle cell anemia crisis
663 Other anemia & disorders of blood & blood forming organs
680 Major O.R. procedures for lymphatic/hematopoietic/other neoplasms
681 Other O.R. procedures for lymphatic/hematopoietic/other neoplasms
690 Acute leukemia
691 Lymphoma, myeloma & non-acute leukemia
692 Radiotherapy
693 Chemotherapy
694 Lymphatic & other malignancies & neoplasms of uncertain behavior
710 Infectious & parasitic diseases including HIV w O.R.procedure
711 Postoperative, post traumatic, other device infections w O.R. procedure
720 Septicemia & disseminated infections
721 Postoperative, post-traumatic infections, other device infections
722 Fever
723 Viral illness
724 Other infectious & parasitic diseases
740 Mental illness diagnosis w O.R. procedure
750 Schizophrenia
751 Major depressive disorders & other/unspecified psychoses
752 Disorders of personality & impulse control
753 Bipolar disorders
754 Depression except major depressive disorders
755 Adjustment disorders & neuroses except depressive diagnoses
756 Acute anxiety & delirium states
757 Organic mental health disturbances
758 Childhood behavioral disorders
759 Eating disorders
760 Other mental health disorders
770 Drug & alcohol abuse or dependence, left against medical advice
771 Alcohol & drug dependence w rehabilitation therapy
773 Opioid abuse & dependence
774 Cocaine abuse & dependence
775 Alcohol abuse & dependence
776 Other drug abuse & dependence
791 O.R. procedures for other complications of treatment
811 Allergic reactions
812 Poisoning & toxic effects of drugs
813 Other complications of treatment
815 Other injury, poisoning & toxic effect diagnoses
816 Toxic effects of non-medical substances

**All Patient Refined Diagnosis Related Group (APR-DRG)
Version 20.0 (2005)**

841 Extensive 3rd degree burns w skin graft
842 Full thickness burns w skin graft
843 Extensive 3rd degree burns or full thickness burns w/o skin graft
844 Partial thickness burns w or w/o skin graft
850 Procedure w diagnoses of rehab, aftercare or other contact w health services
860 Rehabilitation
861 Signs, symptoms & other factors influencing health status
862 Other aftercare & convalescence
863 Neonatal aftercare
890 HIV w multiple major HIV related conditions
892 HIV w major HIV related infections
893 HIV w multiple significant HIV related conditions
890 HIV w one significant HIV condition or w/o significant related condition
910 Craniotomy for multiple sig trauma
911 Extensive abdominal/thoracic procedures for multiple significant trauma
912 Musculoskeletal & other procedures for multiple significant trauma
930 Multiple significant trauma w/o O.R. procedure
950 Extensive procedure unrelated to principal diagnosis
951 Moderately extensive procedure unrelated to principal diagnosis
952 Nonextensive procedure unrelated to principal diagnosis
955 Principal diagnosis invalid as discharge diagnosis
956 Ungroupable

APPENDIX A

UTAH HOSPITAL (WITH EMERGENCY DEPARTMENTS) PROFILE

HOSPITAL CHARACTERISTICS: ED REPORT 2005

ID ¹	HOSPITAL NAME	OWN ²	AFFILIATION	COUNTY	CITY	U/R ³	TEACH ⁴	# ED BEDS
111	Allen Memorial Hospital	G	Rural Health Mgmt	Grand	Moab	R	N	3
118	Alta View Hospital	N	IHC, Inc.	Salt Lake	Sandy	U	N	17
136	American Fork Hospital	N	IHC, Inc.	Utah	American Fork	U	N	11
134	Ashley Valley Medical Center	I	LifePoint Hospitals, Inc.	Uintah	Vernal	R	N	5
104	Bear River Valley Hospital	N	IHC, Inc.	Box Elder	Tremonton	R	N	3
101	Beaver Valley Hospital	G	Freestanding	Beaver	Beaver	R	N	2
103	Brigham City Community Hospital	I	MountainStar Healthcare	Box Elder	Brigham City	R	N	5
145	Cache Valley Specialty Hospital ⁵	I	National Surgical Hospitals	Cache	North Logan	R	N	2
106	Castleview Hospital	I	LifePoint Hospitals, Inc.	Carbon	Price	R	N	9
113	Central Valley Medical Center	N	Rural Health Mgmt	Juab	Nephi	R	N	2
119	Cottonwood Hospital Medical Center	N	IHC, Inc.	Salt Lake	Murray	U	N	18
108	Davis Hospital and Medical Center	I	IASIS Health Care	Davis	Layton	U	N	21
116	Delta Community Medical Center	N	IHC, Inc.	Millard	Delta	R	N	6
140	Dixie Regional Medical Center	N	IHC, Inc.	Washington	St. George	R	N	12
115	Fillmore Community Medical Center	N	IHC, Inc.	Millard	Fillmore	R	N	3
110	Garfield Memorial Hospital	N	IHC, Inc.	Garfield	Panguitch	R	N	2
129	Gunnison Valley Hospital	G	Rural Health Mgmt	Sanpete	Gunnison	R	N	3
139	Heber Valley Medical Center	N	IHC, Inc.	Wasatch	Heber	R	N	5

ID ¹	HOSPITAL NAME	OWN ²	AFFILIATION	COUNTY	CITY	U/R ³	TEACH ⁴	# ED BEDS
310	Huntsman Cancer Institute ⁵	G	Freestanding	Salt Lake	Salt Lake City	U	Y	0
117	Jordan Valley Hospital	I	IASIS Health Care	Salt Lake	West Jordan	U	N	10
114	Kane County Hospital	G	Freestanding	Kane	Kanab	R	N	1
107	Lakeview Hospital	I	MountainStar Healthcare	Davis	Bountiful	U	N	11
121	LDS Hospital	N	IHC, Inc.	Salt Lake	Salt Lake City	U	Y	24
105	Logan Regional Hospital	N	IHC, Inc.	Cache	Logan	R	N	16
141	McKay-Dee Hospital	N	IHC, Inc.	Weber	Ogden	U	Y	23
102	Milford Valley Memorial Hospital	G	Rural Health Mgmt	Beaver	Milford	R	N	1
137	Mountain View Hospital	I	MountainStar Healthcare	Utah	Payson	U	N	11
133	Mountain West Medical Center	G	Community Health Syst.	Tooele	Tooele	R	N	8
142	Ogden Regional Medical Center	I	MountainStar Healthcare	Weber	Ogden	U	N	11
135	Orem Community Hospital	N	IHC, Inc.	Utah	Orem	U	N	9
126	Pioneer Valley Hospital	I	IASIS Health Care	Salt Lake	West Valley	U	Y	18
122	Primary Children's Medical Center	N	IHC, Inc.	Salt Lake	Salt Lake City	U	N	13
120	Salt Lake Regional Medical Center	I	IASIS Health Care	Salt Lake	Salt Lake City	U	Y	15
128	San Juan Hospital	G	Managed	San Juan	Monticello	R	N	6
130	Sanpete Valley Hospital	N	IHC, Inc.	Sanpete	Mt. Pleasant	R	N	3
132	Sevier Valley Hospital	N	IHC, Inc.	Sevier	Richfield	R	N	3
124	St. Mark's Hospital	I	MountainStar Healthcare	Salt Lake	Salt Lake City	U	Y	21
307	The Orthopedic Specialty Hospital ⁵	I	IHC, Inc.	Salt Lake	Salt Lake City	U	N	0

ID ¹	HOSPITAL NAME	OWN ²	AFFILIATION	COUNTY	CITY	U/R ³	TEACH ⁴	# ED BEDS
144	Timpanogos Regional Hospital	I	MountainStar Healthcare	Utah	Orem	U	N	6
109	Uintah Basin Medical Center	G	Freestanding	Duchesne	Roosevelt	R	N	7
125	University of Utah Hospital	G	Freestanding	Salt Lake	Salt Lake City	U	Y	14
138	Utah Valley Regional Medical Center	N	IHC, Inc.	Utah	Provo	U	N	20
112	Valley View Medical Center	N	IHC, Inc.	Iron	Cedar City	R	N	7

¹Hospital ID number. See page 8 for hospital list in numerical order.

²Owner category: G=Government, N=Not for Profit, I=Investor-Owned.

³Urban or Rural location of hospital.

⁴Teaching hospital (Yes or No).

⁵The Orthopedic Specialty Hospital is only included with the ER-Inpatient admissions in 2003 only, Huntsman Cancer Institute is ER Inpatient only, Cache Valley Hospital is ER Outpatient only.

Note: The hospitals with addresses, phone numbers, and number of beds in the above list, can be obtained as a “cut and paste” document from the website <http://health.utah.gov/hda/usersupport.htm> and click on “List of data providers”

An alternative source for a list of Utah hospitals is the Utah Department of Health Website <http://health.utah.gov/hflcra> and click on “Facility Info”, “Alphabetical Listing” and the appropriate facility type.